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ABSTRACT

This course guide outlines the objectives and content for a one-day intermediate level continuing education course on monograph selection, acquisition, and management for health sciences librarians in medium to large-sized hospital libraries. Topics include: (1) characteristics of the scientific and technical monograph; (2) principles of collection development; (3) elements of a written collection development policy; (4) principles of selection, including specific criteria and resources; (5) the materials budget; (6) acquisition methods and procedures; (7) automation of selection and acquisition; (8) financial and statistical reports; (9) inventory and weeding; and (10) collection evaluation. The appendix includes a sample collection development policy, and references are listed throughout. (MES)

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CE 563

MONOGRAPH SELECTION, ACQUISITION, AND MANAGEMENT

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NOTE

CE 563 is based on two previous MLA continuing education courses: CE 38, Acquisition of Biomedical Material, and CE 38A, Monograph Selection and Management.

MONOGRAPH SELECTION, ACQUISITION, AND MANAGEMENT

CE 563 is a one-day intermediate level course for health sciences librarians working in medium to large-sized hospital and academic libraries, with some experience in selection and acquisition. Knowledge of basic selection and acquisition procedures is assumed. Coverage is limited to monographs and monographic series; all other types of materials are excluded. Topics included are principles of selection, collection development policies, selection problems, allocation of funds, order procedures, financial and statistical reports, automation in selection and acquisition, evaluation techniques, inventory and weeding procedures.

COURSE OBJECTIVES

At the conclusion of the course, the student should be able to:

1. Plan and write a collection development policy.
2. Identify standard monograph selection sources and recognize various criteria helpful in selecting monographs.
3. List several factors which should be considered when choosing and evaluating an approval plan.
4. List the advantages and disadvantages of publisher and vendor orders.
5. Implement procedures for purchasing and claiming monographic materials.
6. Prepare a budget estimate and understand the rudiments of allocated funds.
7. Understand and use various accounting and statistical reports associated with monographic expenditures.
8. Plan inventory and weeding projects.

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1. THE SCIENTIFIC AND TECHNICAL MONOGRAPH

CE 563 is devoted to the selection, acquisition, and management of the biomedical monograph. A monograph is:

a treatise on a particular subject, usually detailed in treatment but not extensive in scope. It is generally a book or pamphlet, [and] need not be bibliographically independent.¹

The procedures discussed in this syllabus apply to monographs, textbooks, and other self-contained units of printed matter. For ease of reading and consistency, we refer to these materials as "books" in the text.

The biomedical monograph is a member of the larger class of scientific and technical monographs. As such, it has three distinctive characteristics:

1. Scientific and technical monographs are produced for limited and highly specialized audiences. The average scientific/technical monograph sold only 2,961 copies in 1972² and there is evidence that sales per title have continued to decline.
2. Small print runs limit availability of the scientific/technical monograph. They go out-of-print quickly and must be acquired quickly, if at all.
3. The average cost of a scientific/technical monograph is

¹ American National Standards Committee Z39. A Compilation of Terms and Definitions Appearing in Z39 Standards. (Washington, D.C., 1977): 46.

² Curtis G. Benjamin, "Soaring prices and sinking sales of science monographs," Science 183, no. 4122 (25 January 1974): 282-4.

high compared to trade and textbooks, which sell to larger markets. The average price of a medical book was \$27.73 in 1979.³ Even more alarming was the average cost of a natural sciences book that was reviewed in Science. In 1980 the price was \$42.61.⁴ These high costs are a direct consequence of their essentially limited market.

³ Bowker Annual of Library & Book Trade Information, 25th ed. (New York, 1980): 450.

⁴ Katherine Livingston, "Some data on book prices," Science 211, no. 4485 (27 February 1981): 933-4.

2. INTRODUCTION TO COLLECTION DEVELOPMENT

Collection development is an exciting and challenging area of health sciences librarianship. Although selecting and acquiring the right materials for a particular user group is a very demanding activity, it is also a very rewarding one. Collection development is the process by which the library staff brings together the materials necessary to meet present and anticipated demands of the library users.

The two basic components of collection development are: 1) selection and 2) acquisition. The principles of selection are generally described in a document referred to as a collection development policy. This policy provides information useful in deciding which items to purchase. However, most collection development policies are broader and cover, among other things, related topics such as special or separate collections, gifts, weeding, and cooperation within or among institutions.

Acquisition or procurement is the physical process of ordering, receiving, and paying for materials that have been selected for addition to the collection. Acquisition procedures are generally described in a procedure manual.

A number of factors have served to focus attention on collection development in health sciences libraries. Among the more important ones are: the proliferation of the biomedical literature, increased costs of this literature, library space limitations, the growth of intra/interlibrary cooperation for shared resources, increased emphasis

on accountability in collection development, collection utilization studies, and most importantly, widespread budgetary constraints for materials.

Evans (1979) has formulated the following general principles about collection development which form a philosophical foundation for work in collection development. They are:

1. Collection development should be geared primarily to community needs rather than to an abstract standard of quality.
2. To be effective collection development must be responsive to the total community's needs, not just to those of active users.
3. Collection development should be carried out with knowledge of and participation in cooperative programs at the local, regional, and national levels.
4. Collection development must consider all formats for inclusion in the collection.
5. Collection development was, is, and always will be a subjective, biased work. The intervention of a selector's personal values into the process can never be completely avoided.
6. Collection development is not something that one learns entirely in the classroom or from reading. Only through practice and making mistakes will a person become proficient in the process of developing a collection.

REFERENCE

Evans, G. Edward. Developing Library Collections. (Littleton, CO: Libraries Unlimited, 1979): 22.

3. COLLECTION DEVELOPMENT POLICIES

A collection development policy is a written statement of the plan that will provide guidance and assist the library staff in completing its work. The policy contains detailed information and usually includes a plan of action for aiding the staff in deciding what to select, at what level, how much to acquire, and similar considerations.

Many libraries do not have written collection development policies or do not update them regularly. Regardless of size or the amount of money it spends for materials, a library should have a written collection development policy for the following reasons:

1. A written policy provides a philosophy and objectives to guide those involved in the selection process.
2. It defines those with responsibility for selection and can help develop coordination between different individuals responsible for the collection, both currently and through time.
3. It designates the final authority for decisions when selection responsibility is shared.
4. It sets criteria and standards for the evaluation of materials.
5. It will help achieve a unified view of what areas of the collection should be developed.
6. It can help reduce the number of ad hoc decisions that have to be made regarding the collection.
7. It will help avoid confusion in the minds of selectors and patrons as to what the collection is and is not.
8. It provides the consistency which insures true collection development rather than random and irrelevant accumulation of materials.

Why is it that a library does not have a collection development

policy or, if it has one, fails to update it regularly? The process of reviewing the various elements of a collection development program is difficult, time consuming, and sometimes stressful as varying opinions and philosophies are presented, discussed, and challenged.

Before a collection development program can be implemented, considerable thought must be given to the many factors which influence and shape various practices and decisions in collection development. For example, one must know: 1) the strengths and weaknesses of the collection; 2) the community of users being served and where they are going or how they may change; and 3) other resources available locally to qualified borrowers and those that are accessible through inter-library loan.

As might be expected, a policy must be modified on a regular basis to reflect the changing user community and their needs and, therefore, the information and data gathering, analysis, and review are never entirely finished.

The need for this type of activity in the hospital has been recognized by the Joint Commission on Accreditation of Hospitals in its current library standards:

"There must be evidence of a continuing effort to study the hospital's needs for professional library services and to ascertain whether such services are provided. Immediate and long term goals, as well as the means of providing funding to achieve these goals, should be defined in writing. These needs and goals may be determined through formal written surveys, needs assessments, and structured reviews of the library collection."¹

¹ Joint Commission on Accreditation of Hospitals. Accreditation Manual for Hospitals, 1979 ed. (Chicago, 1978): 140.

Commitment and participation of administrators, faculty, physician practitioners, and library staff who can advise and assist with gathering and analyzing information is extremely desirable. The library committee can serve as a nucleus of this team and offer valuable input. When needed data are not readily available it may be necessary to conduct sampling studies and to compile statistics. In addition, the collection development program is likely to have a broader base of support if selected key individuals participate in its creation.

A number of large research libraries have conducted exhaustive studies involving large numbers of staff, and spanning months and sometimes years. One recent development in the area of collection development is from the Office of Management Studies (OMS) of the Association of Research Libraries. It is the Collection Analysis Project (CAP) which employs an assisted self-study methodology; that is, representative library staff carry out analyses of current collection policies aided by advice and resources provided by the OMS.

Staff and time limitations in the smaller library would obviously dictate a less ambitious approach. Again, whether an extensive study or a more restricted one is conducted, the final written document which will serve as a basis for collection development will contain a number of standard elements.

While collection development policies will differ from one library to another, there are a number of elements which are standard in the written document. They are:

1. Introduction.

2. Definition of terms.
3. Description of the user population.
4. Scope of the collection and specific subjects to be included.
5. Responsibility for selection.
6. Acceptable material formats.
7. Criteria for material selection.
8. Withdrawing and disposing of materials.
9. Gifts.
10. Multiple copies.
11. Cooperative relationships.

The one-person hospital library, the academic medical library, and the special library (e.g., pharmaceutical) all have different purposes and, similarly, their users have different requirements for library materials. The librarian may need to adjust the collection development policy accordingly, but more of the above elements should be present rather than absent in the final document. Although a demanding task, the investment of time and effort in a written policy is worthwhile since it will establish a long range planning tool which can serve as a basis for making intelligent collection development decisions. Let us examine each of the elements of a collection development policy.

1. Introduction

The introduction should contain a clear statement of the institution's philosophy, goals, objectives, programs, and priorities in reference to the library. Future changes in institutional programs

and new patterns of information transfer may be anticipated and detailed in this section. The history of the policy including the date of formulation and the authority establishing the policy should be included here.

2. Definition of Terms

This section can define commonly used terms in the collection development program. Scope refers to the range or breadth of a subject field. Coverage, on the other hand, is the depth or intensity of a subject field. Language, imprint date, physical format, quality, and audience level are important considerations of coverage. Level of coverage refers to both the present state of the collection and the intensity of current collecting activity. Five levels of coverage are suggested in guidelines published by the American Library Association. The levels of coverage are:

1. Comprehensive level. A collection in which the library attempts to include all significant works in various formats of recorded knowledge for a defined field. The aim is generally exhaustive collecting.
2. Research level. A collection which provides major source materials adequate for dissertation preparation and independent research. It includes important scholarly works, reference titles, and specialized monographs as well as an extensive collection of journals.
3. Study level. A collection which is adequate for undergraduate or graduate course work or independent study. It provides current knowledge of a subject for limited or general purposes.
4. Basic level. A highly selective collection which serves to introduce and define a subject. It includes the latest or best monographs, a few major periodicals as well as a variety of reference titles.
5. Minimal level. A subject area which is generally out of scope and in which few selections are made beyond very

basic works.²

One example of the modification and adaptation of these levels to a health sciences library is contained in the policy developed at the Houston Academy of Medicine-Texas Medical Center Library (1980). On the other hand, the National Library of Medicine (1977) recognizes only three levels of coverage: 1) comprehensive, 2) research, and 3) reference. The reference level applies primarily to peripheral subjects and can be equated with the basic level of the ALA guidelines.

3. Description of the User Population

This section should specifically identify the users of the library. Questions to be addressed include the following: Who are the primary clientele? Will others be served? If so, to what degree? There is no doubt that the size of a library's user group has a direct bearing on its collection development. As the size of the library community increases, the degree of divergence in patron needs for materials increases proportionally. Generally speaking, a library will never be able to completely satisfy all of the materials needs of any single group of users.

4. Scope of the Collection and Specific Subjects to be Included

This section could begin with a few brief, general statements regarding the major parameters of the collection. It should be followed by a detailed analysis of all of the subject areas represented by

² American Library Association. Collection Development Committee. Guidelines for Collection Development, ed. by David L. Perkins. (Chicago, 1979): 3-5.

materials in the collection. You should consider the following: What subject areas are currently represented? At what level of coverage? Are there areas not represented or less than desirable? What type, level, and age of material is most heavily used? A brief history and growth of the library collection may appropriately conclude this section. Figures 1 and 2 are examples of a subject profile that can be completed and incorporated into the final collection development policy.

5. Responsibility for Selection

Since the collection is the central focus of the library, the question of who will actually develop it is very important. There should be a clear statement of who will be responsible for selection, what guidelines will be followed, and how the selector's performance will be evaluated. The following groups may actively participate in selection: 1) library staff, 2) library committee, and 3) department heads and/or chiefs of services (e.g., Chief of Surgery). Selection responsibilities may reside entirely with the library staff or the reverse may be true, in which case the library staff simply orders what others have judged to be appropriate for the collection. A third possibility is that selection may be a joint effort of these two groups, perhaps operating through a committee in which the initiative and overall responsibility for the collection resides with the library staff and the faculty and practitioners serve regularly as consultants in appropriate subject areas to review and recommend specific titles for addition to the collection.

6. Acceptable Material Formats

The following are listed as examples of various types of materials

which could be mentioned as acceptable or unacceptable in your particular library.

1. Monographs.
2. Continuations (Advances in, Annual Review of, Yearbook of,).
3. Journals.
4. Newspapers.
5. Slides.
6. Films and Filmstrips.
7. Audio Recordings (Tapes and Records).
8. Video Recordings (Tapes and Discs).
9. Microforms.
10. Pamphlets and Vertical File Materials.
11. Government Documents.
12. Technical Reports.
13. Translations.
14. Dissertations and Theses.
15. Laboratory Manuals.
16. Programmed Materials.
17. Examination Questions.
18. Reprints.
19. Manuscripts and Archival Materials.
20. Models and Specimens.

7. Criteria for Material Selection

In this section you will want to detail some of the criteria used in deciding whether or not to add a particular title to the collection. Selection criteria vary widely from the qualifications of the author to whether or not the book has received good reviews. The next section of this syllabus takes a detailed look at the principles of selection with particular attention on selection criteria.

8. Weeding and Disposing of Materials

Weeding involves the identification and removal of outdated or little-used materials from the primary collection to more remote storage or total withdrawal. Weeding should be a continuous, planned part of collection development. There are good reasons to weed, reasons why weeding is not done, and specific criteria to be considered when weeding.

SUBJECT PROFILE		
Scope	Audience Level	Level of Coverage
BF	Psychology	
H	Sociology	
Q	General Science	
QA	Mathematics	
QC	Physics	
QD	Chemistry	
QH	Biology	
QK	Botany	
QL	Zoology	
QS	Human Anatomy	
QT	Physiology	
QU	Biochemistry	
QV	Pharmacology	
QW	Bacteriology, Immunology	
QX	Parasitology	
QY	Clinical Pathology	
QZ	Pathology	
S	Agriculture, Veterinary Medicine	
T	Technology	
W	Medical Profession	
WA	Public Health	
WB	Practice of Medicine	
WC	Infectious Diseases	
WD 100	Deficiency Diseases	
WD 200	Metabolic Diseases	
WD 300	Diseases of Allergy	
WD 400	Animal Poisoning	

FIGURE 1
SUBJECT PROFILE FOR COLLECTION DEVELOPMENT POLICY

SUBJECT PROFILE (Continued)

Scope	Audience Level	Level of Coverage
WD 500 Plant Poisoning		
WD 600 Diseases Caused by Physical Agents		
WD 700 Aviation & Space Med.		
WE Musculoskeletal System		
WF Respiratory System		
WG Cardiovascular System		
WH Hemic & Lymphatic System		
WI Gastrointestinal System		
WJ Urogenital System		
WK Endocrine System		
WL Nervous System		
WM Psychiatry		
WN Radiology		
WO Surgery		
WP Gynecology		
WQ Obstetrics		
WR Dermatology		
WS Pediatrics		
WT Geriatrics, Chronic Disease		
WU Dentistry		
MV Otorhinolaryngology		
WW Ophthalmology		
WX Hospitals		
WY Nursing		
WZ History of Medicine		
Z Bibliography		

FIGURE 2

SUBJECT PROFILE FOR COLLECTION DEVELOPMENT POLICY (Continued)

Since weeding is an important aspect of collection development and, hence, the collection development policy, it will be discussed in detail in section nine of this syllabus. Nevertheless, you should have a clearly defined section on weeding in your final document.

9. Gifts

Monographic gifts are a traditional means of supplementing a library's collection. There are certain advantages of gifts and there are a number of distinct disadvantages. Since this is an important aspect of collection development, it is covered in detail in section six of this syllabus. Your written collection development policy should contain a section that discusses the policy for accepting, acknowledging, and valuating gifts to the library.

10. Multiple Copies

The question of multiple copies can be complicated and difficult. The written policy should address the basic question of whether the library will purchase duplicate copies of an item and, if so, what factors will determine the number of copies and how long will the duplicates be retained?

11. Cooperative Relationships

In general, as the degree of divergence in user needs increases, the need for cooperative materials sharing programs increases. Formal and informal arrangements at the local, regional, and state levels should be outlined in this section of your policy.

REFERENCES

- Association of Research Libraries. Office of Management Studies. The Collection Analysis Project: A Brief Description. (Washington, D.C., 1977); 1-2.
- Houston Academy of Medicine-Texas Medical Center Library. Collection Development Policy, prepared by Dottie Eakin. (Houston, 1980): 3-4.
- National Library of Medicine. Technical Services Division. Scope and Coverage Manual of the National Library of Medicine, prepared by Paula Meise Strain. (Washington, D.C., 1977): 4-5.

4. PRINCIPLES OF SELECTION: CRITERIA AND SOURCES

In the entire process of collection development, selection itself is probably the most crucial aspect. It is also the most difficult. Selection is the actual process of deciding which materials will be added to the collection and which will not. It should be emphasized that selection is the decision-making process which implements the plans and goals of collection development. Acquisition, on the other hand, implements the selection decisions. This aspect of collection development will be covered more completely in section six.

In general, selection is a shared responsibility and frequently involves consultation. In libraries with large staffs, selection responsibilities may be divided among many librarians in any of several ways. Responsibility may be divided into the basic medical sciences and clinical specialties or each staff member may be assigned on a departmental basis, such as pediatrics, surgery or biochemistry. The larger and more complex libraries will require more effort at coordinating the individuals involved in selection.

Consultation with appropriate users or representatives of the various groups served by the library may be desired or required. It is important to remember that selection can be optimal when it is a joint effort between library staff and users. Too frequently the decisions involved in adding materials to the collection focus on a power struggle between library staff and library users. A good working rule is that the initiative for selection should reside with the library staff but, in turn, they should be responsive to user requests

and consult with them when necessary or desirable. Librarians acknowledge user (e.g., physicians, nurses, teaching faculty) expertise in subject specialities and it is hoped that these users recognize that the library staff has the expertise concerning the book market and the overall knowledge of user needs necessary to coordinate collection development.

As mentioned earlier, the entire process of collection development is not something that one learns entirely in the classroom or from reading. It is through practice and making mistakes that a person becomes proficient at developing a collection. There is no single best method to follow when selecting materials. Strategies will vary and depend upon a number of factors including present size and quality of the collection, programs to be supported and available financial resources.

The selection of current materials is generally emphasized in most libraries. This is almost entirely the case for the selection of monographs in health sciences libraries, particularly titles in the basic medical sciences (anatomy, biochemistry, physiology, etc.) and the clinical specialties (anesthesiology, hematology, oncology, etc.) Most of the choices to be selected will be on a title-by-title basis, but there may be some instances when "en bloc" decisions may be made. For example, with the recent emphasis on bioethics within the health care professions, one may decide to select and acquire a substantial number of both current and retrospective monographic titles in areas such as abortion, death and dying, fetal research, genetic diagnosis and counseling, history of medical ethics, organ donation and trans-

plantation, reproductive technologies and sterilization.

Specific questions to be considered when selecting individual monographs may include the following:

1. What are the qualifications of the author and reputation of the institution with which the author and/or publication is associated?
2. Is there a statement of purpose in the preface or introduction?
3. What does it contain?
4. Who is the intended audience?
5. Is the subject matter technically accurate?
6. Is there a detailed, well-organized table of contents?
7. Are there indexes?
8. Does it contain up-to-date bibliographies in complete, proper bibliographic form?
9. What about style, format and grammar?
10. Are there drawings, photographs, or other illustrative materials? Are they technically correct, properly reproduced, and contribute to the elucidation of the text?
11. What is the standard of production?
12. What is the general reputation of the publisher?

Now that we have looked at what selection entails, together with some general guidelines to aid us in making decisions, let us identify and examine some productive tools useful for selection. This is especially important when considering the tremendous growth in the number of health sciences monographs published in the last few years and the proliferation of specialty areas within the biomedical sciences.

There are any number of publications and resources that can be used in selection. The following categories can all be effectively incorporated into most collection development programs:

1. Core Lists.
2. Book Reviews.
3. Acquisitions Lists.
4. User Suggestions.
5. Promotional Literature.
6. Approval Books.

1. Core Lists

The concept of the core library or core collection is that all major areas of health care practice, including the basic sciences, can be covered by a minimal number of book titles that are authoritative, current, and appropriate to practice. These bibliographies are published and frequently updated at regular intervals to provide listings of what are considered to be the most essential publications for a given discipline or a group of related disciplines. They identify the standard and recommended titles within a particular subject area and can be useful in not only selecting titles for the collection, but also useful in evaluating the collection. Collection evaluation will be considered in more detail in section ten.

However, core lists need to be used cautiously. If a library has all of the titles on a particular core list, there is no assurance that the library is excellent. Alternatively, if a library does not hold the majority of titles from a core list there is no reason to assume a less than desirable monograph collection. While the core concept and actual lists can be incorporated into the collection development policy, they should not replace a written policy that addresses issues unique to your institution.

The following is a selective bibliography of core lists. Although some are dated, they have been included because of their widespread use, current utility or historical importance. The "Brandon list" is considered to be the standard for the field. New and revised core lists are listed in Index Medicus under the subject heading "BIBLIOGRAPHY."

Medicine

Books in Clinical Practice 1971-75; A Selected and Annotated List for Medical Practitioners, Indexed by Subject and Author. Kelly West, Ruth W. Wender and Ruby S. May. Postgraduate Medicine 56:60-81 (December 1974).

An Integrated Health-Science Core Library for Physicians, Nurses and Allied Health Practitioners in Community Hospitals. Norman S. Stearns and Wendy W. Ratcliff. New England Journal of Medicine 283: 1489-1498 (December 31, 1970).

A Library for Internists III; Recommended by the American College of Physicians. Richard Allyn. Annals of Internal Medicine 90:446-477 (March 1979). Updated every three years.

Selected List of Books and Journals for the Small Medical Library. Alfred N. Brandon and Dorothy R. Hill. Bulletin of the Medical Library Association 67:185-211 (April 1979). Updated biannually.

Suggested Core Library List for Family Medical Centres, 1976. Library Committee, Department of Family Medicine, University of Western Ontario. Canadian Family Physician 22:107-116 (July 1976).

Dentistry

American Dental Association. Bureau of Library Services. Basic Dental Reference Works. Chicago: American Dental Association, 1976.

Selected List of Books and Journals for a Small Dental Library. Robert B. Raskin and Isabel V. Hathorn. Bulletin of the Medical Library Association 68:263-270 (July 1980). Updated every four years.

Nursing

A Core Nursing Library for Practitioners. Norman S. Stearns, Wendy W. Ratcliff, Marjorie E. Getchell and Karen Zeller. American Journal of Nursing 70:818-823 (April 1970).

Reference Sources for Nursing. Interagency Council on Library Resources for Nursing. Nursing Outlook 26:325-329 (May 1978).

Books of the Year, annual feature in the January issue of American Journal of Nursing.

Miscellaneous

Administrator's Collection. American Hospital Association, 1978.

Consultation and Reference Sources for Occupational Health.
William R. Lee. Journal of Occupational Medicine 17:446-456 (July 1975).

List of Books Suitable for a Psychiatric Library, Royal College of Psychiatrists. British Journal of Psychiatry, Special Publications No. 12. Kent: Headley Brothers Ltd., 1977.

A Sample Reference Library for the Emergency Department. Howard L. Kirz. Journal of the American College of Emergency Physicians 5:200-204 (March 1976).

Toxicology Information Resources for Poison Control Centers. J.C. Veltri. Clinical Toxicology 12:335-56 (1978).

Women and Health Bookshelf. Jane B. Sprague. American Journal of Public Health 65:741-746 (July 1975).

2. Book Reviews

A book review is a description and/or evaluation of a current title and is usually written to help someone decide whether or not to buy or read the book. Book reviews appear as a regular feature in many biomedical journals but these reviews are generally scattered, uneven and can appear twelve months or more after the publication of the books.

Until 1980 there was no timely, reliable, and comprehensive index to reviews of biomedical books. In 1980 the Institute for Scientific Information in Philadelphia began publishing Index to Book Reviews in the Sciences. It helps locate current book reviews in the sciences quickly and easily and can be an important tool in collection development. Prior to this publication, indexing coverage of book reviews in the sciences had been relatively poor but this tool now covers almost 40,000 book reviews annually that appear in over 3,000 journals.

Reviews are indexed by book author or editor and by subject. Each listing includes the full title and subtitle of the book; series title

and volume number if applicable; publisher name, city, state and country; year of publication; book price; and number of pages and chapters when given. The entries also give the reviewer's name and the complete citation for the review. While not limited exclusively to biomedical book reviews, this publication fills the need for a comprehensive, current index to such information.

Another tool that identifies and indexes book reviews is Technical Book Review Index published by JAAD Publishing Company in Pittsburgh. Covering reviews of new technical, scientific and medical books, it is particularly helpful because it provides excerpts from the original review. Each entry gives complete bibliographic information for the book reviewed, a complete citation for the review, the approximate length of the original review, and the name of the reviewer.

An even greater time lag exists with this publication than with the journal review (approximately three month lag from appearance in a journal to a listing in Technical Book Review Index), but it does bring together conveniently under one cover reviews appearing in a wide variety of sources. This can be particularly useful to small libraries without access to a large number of journals.

The major disadvantages of selecting monographs on the basis of reviews is the delay in making firm decisions until reviews appear and the subsequent purchase of materials that are almost a year old. This, of course, frequently results in less than desirable service to users.

On the other hand, the reviews in biomedical journals are of high

quality and are usually evaluative and critical. Chen (1976) has written a comprehensive, detailed analysis of book reviewing in biomedicine, science and technology. Some of the specific topics covered include:

1. The identification of the major biomedical, scientific and technical journals that contain book reviews and their quantitative coverage.
2. An analysis of reviews that includes publication date distributions, speed of reviewing, length of review, comprehensiveness of treatment and authority of reviewer.
3. The duplication patterns of reviews; e.g., among clinical medicine journals and between general biomedical and clinical medicine journals.
4. The identification of the major American and British publishers of biomedical, scientific and technical books and their quantitative production of book titles reviewed.
5. The inspection of price trends of biomedical, scientific and technical books reviewed.

While this study is available in monographic form, the results were also published in the Bulletin of the Medical Library Association. The five part series in the Bulletin is listed in "REFERENCES" at the end of this section.

Chen identified the top ten reviewing biomedical journals of 1970.¹ The rank, title, and number of reviews is shown in Table 1. Similarly, Chen identified the top ten clinical medical reviewing journals.² The rank, title, and number of reviews in 1973 is shown in Table 2.

¹ Chen, Ching-Chih. Biomedical, Scientific & Technical Book Reviewing. (Metuchen, NJ: Scarecrow Press, 1976): 16.

² Ibid., 39.

<u>RANK</u>	<u>TITLE</u>	<u>NUMBER OF REVIEWS</u>
1	British Medical Journal	375
2	Lancet	317
3	Annals of Internal Medicine	277
4	Journal of the American Medical Association	260
5	Archives of Internal Medicine	211
6	New England Journal of Medicine	174
7	Quarterly Review of Biology	155
8	Bioscience	123
9	Canadian Medical Association Journal	116
10	American Journal of the Medical Sciences	102

TABLE 1

TOP TEN BIOMEDICAL REVIEWING JOURNALS OF 1970

<u>RANK</u>	<u>TITLE</u>	<u>NUMBER OF REVIEWS</u>
1	British Journal of Surgery	155
2	American Journal of Psychiatry	149
3	Physical Therapy	131
4	Archives of Surgery	66
5	Archives of Physical Medicine and Rehabilitation	64
6	Pediatrics	63
7	Journal of Obstetrics and Gynaecol- ogy of the British Commonwealth	62
8	Journal of Clinical Pathology	55
9	American Journal of Ophthalmology	52
10	American Journal of Diseases of Children	48

TABLE 2

TOP TEN CLINICAL MEDICAL REVIEWING JOURNALS OF 1973

Despite the fact that many biomedical journals contain book reviews, only a small percentage of the new titles published in any one year are reviewed. Some titles are heavily reviewed while others are simply never reviewed.

The specific needs of your institution will frequently dictate which specific specialized journals in one or more subject areas should be regularly scanned. Often several librarians share the responsibility of scanning journals for reviews. This is an excellent arrangement because it allows for maximal journal coverage and increased staff participation in selection. Reviews, however, must not be used as a substitute for local judgements. Just because a particular journal claimed that a book is great does not mean that it will be great for your library. Book reviews are aids in selection, not the means of selection.

3. Acquisitions Lists

Libraries often distribute listings of materials that they have recently added to their collection. Such lists are more likely to be useful to libraries in which the collection is smaller and less comprehensive than that of the library which issued the list. In addition to serving as a selection tool, they can also function as a current-awareness tool for new publications. Inquire into the possibilities of obtaining these lists by writing local, regional, national, or special libraries collecting in subject areas particularly relevant to your library's needs. Most libraries distributing new acquisitions lists will add any requestor to the mailing list free of charge.

Listings of recently published biomedical monographs appear in other regularly published sources which are available in most biomedical libraries. A few of the more comprehensive ones are:

National Library of Medicine Current Catalog (Bethesda, MD)

Acquisitions and cataloging guide to monographs and periodicals recently added to the collection of the National Library of Medicine or one of its cataloging partners. Indexed by subject, author and title in quarterly issues with an annual cumulation.

Index Medicus (Bethesda, MD: National Library of Medicine)

Recent monographs, especially monographic series, have been included in the publications indexed in Index Medicus. These titles appear in every monthly issue of Index Medicus in the section "List of Monographs Indexed."

Hospital Literature Index (Chicago: American Hospital Assn.)

Monographs and journals recently acquired by the Library of the American Hospital Association are listed in the quarterly issues of Hospital Literature Index in the section "Recent Acquisitions."

Index to Dental Literature (Chicago: American Dental Assn.)

A rather comprehensive list, "Dental Books Published," is contained in every quarterly issue of Index to Dental Literature.

4. User Suggestions

Since use is one reliable indicator of collection relevancy, user suggestions should be considered an important part of selection. These suggestions may reveal gaps in your collection or trends in user interests not otherwise apparent and serve as a good feedback mechanism.

A dedicated core of library users is often responsible for the majority of patron generated requests. When called upon, these individuals are receptive to reviewing and evaluating materials for their respective fields. Insuring a well balanced collection however requires

that all patrons served by the library be encouraged to make purchase recommendations. Such requests will be completely random in time scope and a nightmare of bibliographic inaccuracy, but should ultimately provide both current and retrospective suggestions. Purchase recommendation forms should be prominently displayed and the library should solicit requests for new materials regularly from various departments.

User requests should be processed within a reasonable amount of time and the requestor should be notified of the action taken. If the item will not be purchased a reason should be given. If users know their requests are given serious and quick consideration they are more likely to participate in collection development.

Interlibrary loan requests initiated by your clientele should also be reviewed for potential purchases. If the publication being sought via ILL is current and within the scope of the collection, it should be considered for purchase.

Continual efforts at publicizing the collection and establishing contact with key personnel within your institution can be very productive and should be a continuing objective of the staff responsible for collection development. One example of a form that can be employed for user suggestions is shown in Figure 3.

5. Promotional Literature

Rarely a day passes without the library receiving some promotional literature from publishers and distributors. Publishers' announcements in the form of flyers, brochures, newsletters and catalogs are

BOOK PURCHASE RECOMMENDATION FORM

I WOULD LIKE TO RECOMMEND FOR LIBRARY PURCHASE:

Author (book) _____
Title (book or
journal*) _____

Publisher _____ Date of Publication _____

Price \$ _____

NEED FOR BOOK. CHECK AS MANY AS APPLY:

- _____ This is a definitive work in its subject area.
_____ This is a new edition of an important book.
_____ This book contains required reading for my students.
_____ This book contains optional reading for my students.
_____ This book will be useful for "rounding out the collection."
_____ This book is requested to fill a gap in the library collection.
_____ This book is necessary for my research.
_____ This book would be useful for my research.
_____ I estimate that this book will interest: (check one)
a few others _____ many others _____

BASIS FOR BOOK RECOMMENDATION: CHECK AS MANY AS APPLY:

- _____ I have seen this book and personally examined it.
_____ I have this book for myself.
_____ This book has received favorable published reviews.
_____ I know of other work(s) by the author(s) and it is of high quality.
_____ I am recommending this book on the basis of the subject content only.

PLEASE PUT THIS BOOK ON RESERVE:

Course _____ No. of Copies _____

Date on Reserve _____ Date Off Reserve _____

REQUESTOR:

Name _____ Date of Request _____

Department _____ Position _____

NOTE: This form should be returned to:

* Please indicate if this is a new journal (Vol. 1, No. 1)

FIGURE 3

SAMPLE BOOK PURCHASE RECOMMENDATION FORM

an easy means of keeping up with new publications and an excellent alerting service to current and retrospective titles of potential interest for the collection. Much of this material contains detailed descriptions of the contents, biographical information on the author, and perhaps other information of real value in making a selection decision.

However, such information must be used with caution. Very few publishers would lie about a book, but the purpose of flyers and announcements is to sell a title. Therefore, everything will be presented in a favorable light. Routing some of this literature to specific departments and individuals for review and comment will assist staff in selecting materials and also promote increased user interactions with the library staff.

A current file of biomedical publishers' catalogs should be maintained because they are often necessary for obtaining order information and are quite useful in answering staff and patron questions regarding new publications. Names and addresses of biomedical publishers are contained in various sources such as Medical Books and Serials in Print (New York: Bowker, annual), Health Care Directory (Oradell, NJ: Medical Economics, annual), Medical and Health Information Directory (Detroit: Gale Research, 1980) and Literary Market Place (New York: Bowker, annual). Catalogs can be obtained by writing the publishers and requesting to be added to their mailing list.

Materials published by health associations and organizations are usually not advertised and distributed commercially. For this reason,

it is particularly important to be on their mailing lists for notification of new publications and catalogs of materials available from them. In addition to the major national health organizations such as the American Medical Association, the American Hospital Association, the American Public Health Association, the American Psychiatric Association and the American Nurses' Association, state and local health organizations may also distribute publications of interest to your users. Names and addresses of health organizations can be found in the reference directory section of the Journal of the American Medical Association, the Guide to the Health Care Field (Chicago: American Hospital Association, annual) and the Encyclopedia of Associations (Detroit: Gale Research, annual).

Although there are few or no problems involved in obtaining promotional literature, the business of maintaining such flyers and catalogs can create extensive problems if some working system is not adopted.

6. Approval Books

Approval plans deliver books for examination before purchase. The receipt of books on approval provides, perhaps, the ideal method of selecting from the best possible source of information--the book itself. This is in contrast to the other five methods discussed previously which necessitate selection decisions to be made without benefit of the volume in hand.

Ideally, they improve selection while reducing acquisition work. Once an approval plan has been established, current imprint books are supplied automatically, no purchase order required. Books not selected

can be returned to the supplier. The widespread availability of approval plans, their use in many types of libraries, and a substantial literature on the subject confirm the value of approval plans as a method of selection and acquisition.

Again, the major advantage of an approval plan is the opportunity to make selection decisions based on a book itself rather than information about it. Many titles that appear to be relevant or even perfect on the basis of bibliographic information or promotional material turn out to be disappointing in actuality. Approval plans, like published reviews, allow the application of qualitative criteria in selection.

A second important advantage of approval plans is speed. Chen (1976) found that there is an average lag of ten months between the publication date and the first published review of a title. Hulbert and Curry (1978) found that many titles selected on the basis of published reviews had already been supplied by the library's approval plan by the time the review appeared. Both studies are particularly relevant because they deal specifically with the health sciences literature.

There are two basic types of approval plan: distributor plans and publisher plans. Each has distinct advantages and disadvantages.

Distributor plans are particularly suited to medium and large-scale selection programs. Distributor plans funnel the output of many publishers through a single source of supply, reducing invoice processing and correspondence for the client library. Distributor plans depend on high volume to break even or make a profit, and while some distributors may accept small libraries, most prefer clients with substan-

tial monograph budgets (over \$20,000).

Publisher plans, in which a client library deals separately and directly with a number of different publishers, provide smaller libraries with a comparable opportunity to receive current imprints with return privileges. Direct plans originated for several reasons, primarily to retain and increase sales to small libraries that could not be profitably served by distributor plans. Direct plans also provide an alternative to medium and large-sized libraries that are not satisfied with distributor handling of certain publishers. While the direct approach is manageable when dealing with a small number of publishers -- five to ten -- it quickly becomes ineffective as the number of plans increases.

Both distributor and publisher plans provide discounts. The distributor rate is generally 10%; direct plans may offer discounts of up to 12 and 15% as an incentive to encourage libraries that have never used approval plans to break their processing routines and develop the procedures that approval purchasing requires. While the discounts may be attractive, the terms are sometimes more stringent than distributor plans, allowing the library little flexibility in adapting the plan to its needs.

Publisher plans provide materials slightly faster than distributor plans; both plans make books available more quickly than the traditional review-based selection procedure.

Both types of plan also depend on a low return rate since returns are costly for both library and supplier and offset the savings and

advantages of an approval plan. It is this characteristic of approval plans that has led to their most frequent and serious criticism, that is, that they require no selectivity and are an abrogation of the library's responsibility to an outside agent, the supplier. While this criticism is justified in that approval plans can and have been substituted for selection programs, it misses the point that they were never intended to serve that purpose. Approval plans are simply one component of a total selection program that includes other methods as well. It also overlooks the fact that successful approval plans are mutual efforts that require planning, evaluation, and communication on the part of both library and vendor. Approval plans insure a steady flow of current, commercial materials from representative publishers, allowing development of a minimum collection through routine methods and freeing selector time for those items that cannot be identified and acquired in a routine manner.

The key to a successful approval plan is a well-defined collection development policy. Without one, it is impossible to state the library's collection needs in such a way that the supplier can accurately identify and exclude irrelevant materials. The translation of library requirements into supplier stock is accomplished by means of a subject profile which also includes additional specifications such as academic or professional level, language, and price limitations.

Generally, there are two ways to create a subject profile: use a supplier form if available or provide the supplier with a copy of the library's collection development policy if the supplier does not have a profile form. In either case, the process of creating a profile

may require consultation and "fine tuning," focusing initially on negotiation of terminological differences and later on revisions of subject coverage as the library's needs and collection development policy change over time.

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5. THE MATERIALS BUDGET

The best way to insure adequate support for the library is to be an active, informed participant in budget development. While the fiscal role assigned to the librarian varies from institution to institution, the librarian who takes the initiative to learn how, when, and by whom budget decisions are made, and who integrates library budgeting into the total fiscal process will gradually be accepted as a valuable ally in institutional planning and development. Ideally, all staff responsible for collection development should understand and participate in the budgetary process.

In general, the library budget should be developed within the context of institutional goals and objectives, and the materials budget within the context of the library budget. A budget, then, is the financial statement of the money needed to achieve the planned activities (i.e., goals and objectives) within collection development. The more extensive the institutional and library objectives, the greater the budget and resources needed to achieve them. The library which supports basic research and patient care will need more funding and materials than one that supports only one or the other.

Developing a budget requires adequate and reliable information upon which decisions can be made and implemented. Financial and statistical data compiled from previous years' performances as well as anticipated publishing and economic trends including inflation are basic considerations in budget planning.

The most realistic materials budget is based on two sets of information: 1) published price indexes and 2) library statistics. Published price indexes provide reliable base figures; each library's own statistics provide the "fine tuning" needed to adjust the base figures to its own particular purchasing program.

Price indexes for library materials are numbers used to show periodic price changes in terms useful to libraries. They display economic information in the consistent statistical pattern needed for planning, budgeting, and analysis.

To produce a price index for a category of library materials, the indexer gathers the list prices of items in the category, totals them, and divides the total by the number of items to obtain the average price per item. This figure is then divided by the average price of the same category of materials for the base period and multiplied by 100 to obtain the index.¹

Regular price indexes for books are available for the United States, Great Britain, West Germany, and Latin America. A source for reliable information on monograph publication and cost data is the yearly Bowker Annual of Library and Book Trade Information (New York: Bowker). Subject listings of monographs published, average prices, and price indexes for the current year are provided in various tables. Such information can be a guide for projecting costs and quantity of publications for the next fiscal year.

¹ Helen W. Tuttle, "Price indexes, library materials." In Encyclopedia of Library and Information Science, v. 23. (New York, Marcel Dekker, 1978): 254.

A book budget and its related index are shown on the pages following the text of this section. This material illustrates the combined use of a price index and library statistics to project a budget:

1. The base figures for natural science (\$22.81), preclinical science (\$22.81), and clinical science (\$22.15) were obtained from the 21st edition of the Bowker Annual, 1976.
2. The base figures for nursing (\$9.27), dentistry (\$19.88), and nutrition (\$16.99) were obtained from the library's statistics.
3. The increment to cover inflation can be computed in several ways:
 - 3.1 Subtract the 1974 index for medical books from the 1975 index, giving the percentage price increase for one year:
$$165.2 - 141.1 = +24.1$$
 - 3.2 Subtract the 1972 index from the 1975 index and divide by 4 to obtain the average inflation in any one year:
$$165.2 - 120.7 = 44.5/4 = 11.1\%$$
 - 3.3 Project the figure based on experience. The sample budget allows 5% for inflation, which is less than the figure calculated using the other two methods.

The budget development process illustrated above can be used for serials and to project total budgets. REMEMBER, however, that serials inflate at a different rate than books. Use the appropriate index to calculate the serials rate.

If you use more than one index (British and American, for example) to project a budget, proceed with care. The data may not be comparable because:

1. Some indexes collect statistics on a calendar year basis (January - December), others on a split year basis

(July - June)--that is, they are based on different time periods;

2. The American indexes use a three-year average as a base figure, the British indexes a one-year base;
3. Definitions of material type vary. For example, some indexes count as "books" hardbound volumes only, others include both hardbound and paperbound volumes;
4. Price units vary. Some indexes are based on price per volume, others on price per title.

In most cases, a budget can be safely estimated using one set of price indexes which closely matches the library's purchasing profile. The point to remember is that a budget based on published price indexes is more accurate and credible than one that is not. In addition, statistical documentation on the number and diversity of library users, increases in book requests, circulation data, and interlibrary borrowing/lending is one concrete way to seek an increase in the materials budget.

About the only thing that can be said with certainty on the allocation of book funds is that there is no single best method or formula that is completely satisfactory. An investigation of the literature reveals that academic librarians are the most active in developing various models and formulas for allocation of funds. Presumably, allocation matches funds with needs. No matter how needs are determined, the allocation system attempts to distribute funds in a way that will satisfy those needs.

An allocation system for book funds provides guidelines for individuals actually involved in selection. Individual titles can be

considered for selection not only on the basis of price, but also in relation to the total potential number of titles available. Furthermore, allocation figures can reflect selection priorities whether they be current imprint purchases, retrospective purchases, textbooks and other standard sources or the more scholarly, research oriented monographs.

In general, four major factors should be considered in allocative formulas: 1) subjective judgments based on collection evaluations and historical inequities; 2) size of departments or units; 3) level of program and usage; and 4) literature size and cost.

By reviewing and evaluating the published literature, a librarian can use or modify a formula or model which best fits the needs of his/her library. Formula adaptation, for example, based on the number and type of library users seems one possibility since such information can be gathered, categorized, and weighted. In any case, the ultimate objective is to develop a simple formula which can describe the book needs in relationship to books available and books used by various groups of library users.

No matter which method or model of allocation is used, it must reflect the goals and objectives detailed in the collection development policy, yet contain some type of flexibility to allow for adjustments and demands as particular needs arise. In small and medium-sized hospital libraries the allocation of funds generally reflects a policy of maintaining working collections of the current interests of a diverse group of health care professionals largely involved in patient care. On the other hand, the academic medical library has a greater

interest in building and maintaining strong research collections for a large group of users usually involved in teaching and research as well as patient care. A systematic method for allocation of funds to various departments and disciplines served by a health sciences library is of primary importance to assure that the library is equally serving the needs of all its users.

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CLEVELAND HEALTH SCIENCES LIBRARY

of Case Western Reserve University and
The Cleveland Medical Library Association
Cleveland, Ohio 44106

PROJECTED EXPENSES - MONOGRAPHS

Projected expenses for monographs and monographic series in fiscal year 1977/78 total \$68,042.16. The projected figures are based on a purchase rate of 264 new books per month; totalling 3,168 new books for the fiscal year. This is a decrease of 36 books per month from fiscal 1976-77 projections of 300 purchases per month, and is substantially lower than our actual processing rate of 400+ books per month. \$68,042.16 is the minimum expenditure below which purchasing may not fall without serious damage to the monograph collections at both the Allen and Health Center Libraries.

Base prices per volume for the natural, preclinical, and clinical sciences were obtained from the Bowker Annual, 21st ed., 1976. Base prices for nursing, dental, and nutrition books were obtained from Acquisition Department statistics. An additional 5 percent increment per volume has been added to cover the cost of inflation.

	<u>% of Total Acquisitions</u>	<u>Vols/ Month</u>	<u>Vols/ Year</u>	<u>Cost/Vol + 5 %</u>	<u>Total Cost 1977/78</u>
Natural Science	11.36	30	360	22.18+1.14 23.95	8,622.00
Preclinical Science	15.15	40	480	22.18+1.14 23.95	11,496.00
Clinical Science	53.05	140	1,680	22.15+1.11 23.26	39,076.80
Nursing	12.12	32	384	9.27+0.46 9.73	3,736.32
Dentistry	4.16	11	132	19.88+1.00 20.88	2,756.16
Nutrition	4.16	11	132	16.99+0.85 17.84	2,354.88

6. ACQUISITION

There are three basic methods of acquiring books: by purchase, by exchange, and as gifts. While most libraries use all three methods, purchasing is usually the primary method while exchange and gift operations are secondary methods.

Buying books is the most effective method of obtaining current imprint monographs as published, a top priority of most selection programs. It is also the method of choice for obtaining books that are essential to retrospective and historical collecting programs. Because the library controls what to buy, and when, purchasing allows the orderly and deliberate implementation of a library's collection development policy. Purchase decisions can be based on priorities identified by the policy, a flexibility sometimes lacking with exchange programs and notably absent in the case of gifts.

Exchange programs, when based on clearly identified academic and research needs, do contribute essential materials to collection development programs. However, they should be initiated only on the basis of highly specific needs, such as language collecting or area studies programs. Exchange programs are least effective when used as a means of increasing a library's volume count or obtaining free materials.

Gifts are the least effective method of acquiring books. While gift funds, used at the library's discretion, do contribute to collection development programs, gift books seldom do. Gift books arrive at the donor's convenience, frequently duplicate existing holdings, and are

often in poor condition, characteristics not well-suited to an ordered collection development program. If accepted, but not added to the collection, processing diverts valuable time from more important priorities.

This course emphasizes purchasing procedures because they are the most effective method of obtaining books. Procedures for other methods of acquisition are basically adaptations of an efficient purchase procedure.

Buying Books

1.0 VERIFY EVERY BOOK TO BE ORDERED BIBLIOGRAPHICALLY.

1.1 The purpose of verifying is to insure that the preorder search of acquisition records, card catalogs, and serial holdings will be accurate, preventing duplicate orders and costly returns that waste library and supplier time alike.

1.2 The following bibliographic elements are needed to order a book:

Author or editor (complete name).
Title, including subtitle.
Edition.
Place of publication.
Publisher.
Date of publication.
Series name.
Volume number if part of a series.
OR
Number of volumes.
List price.
ISBN (International Standard Book Number).

1.3 It is helpful to record, correct, and revise the initial bibliographic citation on a "temporary" order form and then transpose it to the official purchase order form to prevent waste and additional cost.

1.4 There are two major sources of verification:

1. commercial bibliographies, such as Books in Print.
2. descriptive bibliographies, such as the National Library of Medicine Current Catalog and national union catalogs.

Commercial bibliographies are designed to sell books, identifying them precisely for order purposes. They are generally author-title indexes, varying in content and format, and are not necessarily bibliographically complete. Most commercial bibliographies are annual cumulations, supplemented by periodic updates.

Descriptive bibliographies are designed to describe books as objects and in terms of their subjects or contents. While they are the standard authorities for bibliographic control and identification in libraries, they are seldom reliable indicators of availability. The National Library of Medicine Current Catalog is the bibliographic authority most known and used by biomedical librarians.

2.0 SEARCH LIBRARY CATALOGS AND ACQUISITION RECORDS.

2.1 The purpose of the preorder search is to be sure that the library does not already own the book.

2.2 The preorder search should include:

1. the card catalog.
2. the ON ORDER file.
3. the RECEIVED file.
4. the serial holdings record.

2.3 If the citation involves a corporate entry (Symposium on ..., International Congress of ...) use several search strategies, including editor and title. If the book is part of a series, check to be sure the series is not being ordered through your subscription agent.

3.0 CHOOSE A SUPPLIER.

Unfortunately, there is no simple rule for choosing book suppliers. It would be convenient if a library's needs could be met by a single supplier, but most libraries use several.

3.1 There are two major sources of supply:

1. publishers.
2. book distributors.

Ordering direct from the publisher has the advantage of discount and greater speed of acquisition, but sometimes increases the amount of paperwork required. The greater the number of orders and the smaller the acquisitions staff, the more difficult it becomes to order direct. Buying from a book distributor reduces the paperwork but is sometimes slower.

3.2 Discount.

While discount is important, trying to place every individual order on the basis of discount alone is a poor strategy. While some publishers offer higher discounts than a dealer would, there is no single discount list and comparison among competitors is difficult. The alternative is to locate discount information in individual publisher catalogs. In most cases publishers offer libraries no higher a rate than book dealer would and discounts are roughly equal in the long run.

Publishers do offer book distributors a preferential or higher discount rate. Book distributors (and subscription agents) provide a valuable service--increased access to publications. In contrast to the publisher, whose funds must support many complex operations, the distributor can devote his entire financial in-

vestment to one--order fulfillment.

Typically, book distributors:

1. establish a contractual agreement with many publishers to receive "X" copies of all publications in certain categories.
2. buy some publications in large quantities for resale on an item-by-item basis to individual consumers.
3. serve as a central source of supply for the consumer, reducing correspondence and order processing costs.

Publishers prefer to sell in large quantities to distributors rather than processing individual orders directly. While few publishers will turn down a direct order for a single copy, quantity sales are more profitable. If the list price of a book were \$10.00 and the publisher's fulfillment cost \$1.00 per order, the sale of one copy each to 100 individual purchasers would net the publisher a profit of \$900.00 or 90%:

\$10.00 x 100 = \$1,000.00	Gross profit
- 1.00 x 100 = 100.00	Distribution cost
\$ 900.00	Net profit

The sale of 100 copies to one purchaser would net \$999.00 or an additional 9.9% profit for a total profit of 99.9%:

\$10.00 x 100 = \$1,000.00	Gross profit
- 1.00 x 1 = 1.00	Distribution cost
\$ 999.00	Net profit

This example is, of course, very simple, but it accurately describes the mathematics of discounts. Because volume sales to distributors are more profitable, publishers can afford to extend more generous discounts to them. Biomedical book distributors typically receive 25% discount from publishers on scientific and technical monographs. As a sales incentive they offer 10% discount to their clients and pay their expenses (warehouse, salaries, utilities, supplies, freight charges, and insurance) out of the 15% margin.

3.3 Service

While discount is important, service is equally important in selecting a book supplier. High discount cannot compensate for slow delivery, neglected correspondence and claims, and careless accounting on the part of a supplier.

3.4 Location

Dealing with a supplier in the immediate geographic area can be an advantage. Shipping and communication costs will be more reasonable; there may also be more regular coverage by service representatives.

3.5 Subject specialty

Dealing with a book distributor who specializes in biomedical materials usually provides quicker access to required items and greater understanding and tolerance of the problems of health sciences libraries. Materials outside the subject area will not be stocked and will be ordered from the publisher.

3.6 Stock

While most biomedical bookdealers attempt to stock as many current titles as possible and maintain good inventories of standard materials, their coverage of noncurrent titles may be less consistent and exclude certain publishers. Orders not in stock must be forwarded to the publisher, slowing delivery. Information about a distributor's stock can be obtained by asking which publishers are included and for what period of time. Good dealers welcome librarian visits to their warehouses.

3.7 Service charges

Service charges vary from distributor to distributor. Many distributors have written statements describing their service, shipping charges, and discount policies which are available upon request. If the distributor does not, question him carefully. In general, book distributors add service charges only on special or low discount orders.

3.8 Shipping charges

Shipping charges can be expensive. While most suppliers pay for delivery to the library, not all do, so request this information before beginning a long-term relationship with a distributor. Libraries pay the shipping charges for returns to suppliers.

4.0 PREPARE THE PURCHASE ORDER FORM.

With the exception of the bibliographic data used for ordering, no single factor affects the efficiency and results of the order process as much as the purchase order form. While the form should meet the needs of both library and supplier, it is an external means of communication and information required by the supplier should have preference over information used internally by the library. Using the purchase order form for the dual purposes of ordering and cataloging may be convenient for libraries but is

inconvenient for suppliers because the two types of information are not always compatible. The purchase order form should ideally be used for only one purpose: ORDERING.

4.1 General rules for order forms:

1. The form should be as clear and simple as possible. Avoid extraneous information.
2. Each form should give the name and address of the purchasing institution.
3. Each form should be clearly identified as a purchase order.
4. Each form should give the name and address of the supplier.
5. Data elements on the form should be grouped to separate library information from supplier information. THIS IS IMPORTANT. Failure to do so is the source of much confusion to library and supplier alike.
6. Each data element on the form should be clearly identified by its name (purchase order number, fund number, author, title, number of copies, etc.). Unidentified data are confusing. Avoid abbreviations and initials in labelling and completing the form.
7. Elements which look alike, especially numerical data (ISBN, ISSN, fund number) should not be placed together.
8. Areas where data are of variable length (title, series, publisher) should not be crowded. THIS IS IMPORTANT.
9. Book order forms should refer to one title only. Avoid list forms for books if possible.
10. If a list form is used for ordering books, each list should have a separate purchase order number and each item on the list should have an individual item number.
11. Multiple copy order forms should designate the purpose of each copy clearly (Order copy, claim copy, accounts payable copy).

4.2 In addition to the bibliographic elements listed in part 1.2, the following specific information relating to each item ordered are required:

1. Information relating to the order:

Order date.
Purchase order number.
Fund number if required for billing.
Number of copies required.

2. General instructions which apply to every order:

Shipping address.
Billing address.
Invoicing instructions (invoice in duplicate, etc.).

3. Special instructions:

Rush.
Quote.

4.3 Figure 4 shows an order form designed to American Library Association specifications.

4.4 If an institutional purchase order form is used, it is important that the librarian be familiar with it and offer constructive suggestions on its use. Stress the importance of accuracy in transposing information from the library's requisition to the purchase order form. If possible, secure permission to complete the requisition form in the library and forward it to the purchasing authority. If list forms are used, each form should contain the publications of only one publisher.

4.5 If your supplier prefers a specific form, or if he provides order forms, they should be used.

5.0 KEEP AN ACQUISITION RECORD FOR EACH BOOK ORDERED.

5.1 A unit record system, based on the library's purchase order form, is an efficient method of keeping acquisition records for books. As the name implies, a unit record system provides an individual record for every book ordered. If the library or institution uses list order forms for books, a unit record should be kept as well, although this creates additional work.

5.2 The unit records should be organized in two separate alphabetic files:

1. BOOKS ON ORDER.
2. BOOKS RECEIVED.

The files should begin the first day of the fiscal year and close the last.

6.0 RECEIVE AND PROCESS ORDERED ITEMS.

CASE WESTERN RESERVE UNIVERSITY / CLEVELAND HEALTH SCIENCES LIBRARY

PURCHASE ORDER NO.	DATE	FUND
--------------------	------	------

QUANTITY: UNIT PRICE: ISBN:

AUTHOR:

TITLE:

PLACE: PUBLISHER: DATE:

VENDOR: *WILLIAMSON*

SHIP & BILL TO:
 CASE WESTERN RESERVE UNIVERSITY
 CLEVELAND HEALTH SCIENCES LIBRARY
 HEALTH CENTER BRANCH
 2119 ABINGTON ROAD
 CLEVELAND, OHIO 44106
 ATTN: ACQUISITIONS LIBRARIAN

BILLING & REPORTING INSTRUCTIONS ON REVERSE SIDE

FIGURE 4
 ORDER FORM DESIGNED TO AMERICAN LIBRARY ASSOCIATION SPECIFICATIONS

- 7
- 6.1 The length of time it takes to receive and complete a book order depends on the supplier's stock and method of delivery. While it is possible to receive a domestic order within two weeks, the average domestic delivery time for books is four to six weeks. Expect a minimum of six weeks delivery time for items forwarded through the international mails.
 - 6.2 If the materials are delivered directly to the library, always check the address label before opening the package to be sure it has been delivered to the correct address. If the package has been incorrectly delivered, forward it to the correct address or return it to the supplier.
 - 6.3 Check the package for an invoice or packing slip. Be sure the contents of the package agree with the invoice or packing slip. Notify the supplier immediately of any discrepancies.
 - 6.4 If the correct books have been supplied, remove the order record from the ON ORDER file, stamp it with the receipt date, cost, and invoice number, and transfer it to the RECEIVED file.
 - 6.5 Do not mark any book until you are sure the order is correct and returns and adjustments unnecessary. Most suppliers refuse to accept marked or damaged materials.

7.0 PAY THE INVOICE

- 7.1 Suppliers expect payment promptly, within 30 days of the invoice date. Unpaid invoices may be subject to finance charges after that time. Libraries which accumulate large amounts of unpaid bills may have their credit stopped.
- 7.2 Keep record of all payments through the unit record system. Mark the price of the book and the corresponding invoice number on your copy of the order form.
- 7.3 If the library handles its own receiving and payment, it should keep an invoice file, that is, one copy of every invoice approved for payment should be filed in the library and retained until the legal statute of limitations expires.
- 7.4 Invoice problems.

The most frequent invoice problem is price discrepancies. Price fluctuations are continuous; librarians must expect them and use judgment about when to question them. Differences of several dollars are not worth writing about; it costs more to write a business letter. However, if the library has been able to locate a price during the pre-order search and verification, a large difference should be checked by consulting the publisher's literature or, if necessary, another library. If the price in-

crease cannot be verified, the library should not hesitate to consult the supplier about the difference.

7.5 Statements

A statement is a summary of financial information and good suppliers provide them regularly. There is no standard format for statements; each supplier has his own. The information is generally numerical in form and includes the invoice number, date, and the amount of the invoice. It may also include the library purchase order number, but seldom refers to author or title information. Some statements list all transactions--debits and credits--within a specific time period; others list only debits.

Never ignore a statement. Statements are the supplier's way of saying that payment has not been received and are an important aid in identifying and solving problems. Allowances must be made in interpreting statements, but if an invoice has been listed on three successive statements, take action to learn why: Was the original invoice received? (If not, request another invoice.) Was the invoice held until an adjustment could be made? (If so, respond with the reason.) Does the invoice belong to the library? (In large institutions, invoices are sometimes charged to the wrong account.) Was the library's payment credited to the wrong account by the publisher? (If possible, send a copy of your cancelled check.)

8.0 CLAIM BOOKS THAT HAVE NOT BEEN RECEIVED.

8.1 Order files should be reviewed periodically and claims made on a routine basis. A quarterly claims schedule is efficient for both library and supplier. More frequent claiming creates a burden of paperwork that is difficult to handle.

8.2 Avoid claiming by letter; settle for simple, but speedy, replies.

8.3 One efficient system for claiming books is based on the purchase order form. Make two photocopies of the purchase order form; stamp both in red: THIS IS A CLAIM. PLEASE ADVISE ON THE STATUS OF OUR ORDER. REPLY ON DUPLICATE COPY. Both copies should be sent to the supplier; one for his record and one for reply purposes. Note the claim date on your copy of the order form and if a reply is received, note the date and the message on the order record.

9.0 MAKE RETURNS AND ADJUSTMENTS IF NECESSARY.

9.1 Returns and adjustments should be made immediately. If the order was handled by a distributor, adjustments for damaged copies,

missing and incorrect materials must be made with the distributor, not the publisher. The publisher will have no record of the order.

- 9.2 Telephone calls can be used to initiate discussion and to get simple, factual answers, but never rely on a phone call to settle a complex problem. Always follow up with a confirming letter. Supplier and library personnel change; written records are the only means of keeping accounts in order.
- 9.3 Limit each piece of correspondence to one problem. Be brief but specific in your description of the problem and refer to purchase order, invoice, and other reference numbers. Keep copies of all correspondence in alphabetical files. If the problem is a serious one, involving a substantial amount of money or the threat of legal action, retain all records until the statute of limitations has expired.
- 9.4 Returns should be clearly identified on the wrapper and inside the package. Use the names and addresses of both the library and the supplier on the wrapper; include copies of the adjustment letter, invoice or credit memo inside the package.

10.0 EVALUATE LIBRARY AND SUPPLIER PERFORMANCE.

The key to successful budgeting and performance evaluation is statistics, which are discussed in section eight.

Out-of-Print Books

This discussion of out-of-print books refers to those that are sought for their content rather than their form or rarity. A book is defined as out-of-print when it is no longer obtainable from its publisher. While there is a tendency to think of out-of-print materials as several years old and more, it is not uncommon for books and periodicals to become unavailable within twelve months of publication. If a title is not cited in the current edition of a commercial bibliography, there is a very good chance that it is out-of-print.

Success in obtaining out-of-print books requires a different strategy than in-print acquisition, where materials must be obtained with the utmost speed. Out-of-print books take only slightly more effort but much more time and patience. The strategy that is least likely to be successful is a one-time, on-demand order for a single title. Routine searching of dealer catalogs and firm orders usually produce better results.

Routine searching of out-of-print catalogs is a luxury many libraries cannot afford in these straitened times, but it is the most effective method of obtaining out-of-print titles when such a program is justified by the collection development policy. The library has the option of selecting from what dealers offer or searching dealer catalogs against its desiderata file. Like their in-print counterparts, out-of-print dealers often specialize by subject and dealing with a specialist saves the necessity of eliminating extraneous catalog entries.

Out-of-print catalogs must be obtained and searched quickly. Some European and American dealers airmail catalogs to clients at their own expense. If a dealer does not offer this service, it is worthwhile to pay for it if the library is serious about an out-of-print program.

As catalogs are received, they must be given immediate attention. If selecting is done by individuals who are not members of the library staff, the catalogs should be delivered to them and picked up as soon as they are finished. All who are involved in out-of-print selection and ordering from dealer catalogs must be impressed with the importance of speed.

The preorder search of the catalogs and/or the desiderata file should begin as soon as selection has been completed. Checking is sometimes difficult because the quality of dealer catalogs varies, but orders should be submitted as quickly as possible. Telephone orders are quickest, but must be followed with a marked copy of the dealer's catalog, a library-prepared list, or separate order forms.

Reporting practices for items that cannot be supplied also vary from dealer to dealer. Some notify a client that desired items have already been sold; others do not. Rather than avoid dealers that do not report, a client can avoid problems by making it clear that its order applies only to the advertised copy and that unfilled orders are automatically cancelled. If replies or materials have not been received within twelve weeks, the order should be considered void and the order record cleared.

Titles that have been identified as essential and to be obtained regardless of time or difficulty can be submitted to dealers in list form. There are basically two ways to submit a list.

The first is to submit the same list to several dealers simultaneously, requesting quotations on stock items only. This strategy is to the library's advantage because it can potentially supply more books in a shorter period of time, allows the library to compare prices and choose when several dealers offer the same title, and allows the placing of firm orders which are almost certain to be filled. It also has one drawback. Some dealers respond slowly; others do not respond at all. Some refuse to work on lists unless they have exclusive rights to them. Still others remember libraries that always ask for quotes but never buy. Their reluctance to invest time and money in a list when there is little chance of a sale is understandable. At any rate, the library that waits indefinitely for replies will be seriously delayed in placing orders. All lists should have reply dates or time limits on them.

A second method of ordering by list that avoids some of these problems is to submit a list to one dealer and allow him from twelve to eighteen months to search. One or more lists can be submitted to a succession of dealers over a period of time. It is important, however, to vary the dealer order when multiple lists are being searched so that all have first chance at some list. Routine use of the same sequence puts one dealer in the position of always receiving the list last and getting all the difficult titles. It does not allow him a

a fair chance to demonstrate his service capabilities or a fair chance at a sale. Those that consistently receive the problem or marginal orders soon tire of a client.

When all else fails, reprinting can be used as a method for obtaining titles that are considered essential. However, obtaining reprints is not easy, inexpensive, or quick. Bibliographic control of available reprints is chaotic and the library that decides to pursue an on-demand reprint must solicit the copyright permission, locate an extant copy of the work, do the copying itself, or forward the permission and the copy to a reprint firm.

Monographic Series

A monograph series is:

a number of separate works (i.e., monographs) usually related to one another in subject, issued in succession, normally by the same publisher in uniform style with a collective-level title. Monographic series may be numbered or unnumbered.¹

This definition, while straight-forward, is deceptively simple and does little justice to the almost chaotic variety with which monographic series, numbered and unnumbered, regular and irregular, are published. While numbered series of either frequency can be acquired and managed with little difficulty, few publications cause more problems in libraries than unnumbered irregular series. Unnumbered irregular series frustrate users, staff, and distributors alike, causing a disproportionate number of user inquiries, claims, paper and bibliographic work. In addition, there is little research or hard management data to support decision-making relative to these titles. Until we know the characteristics of the publications themselves, the publishers that originate them, what they cost, how they are cited, how they are used, patterns of bibliographic control, and processing costs, acquiring and managing them will be difficult.

Despite the lack of objective data, there are several tactics a library can use to cope with unnumbered, irregular series.

1. Libraries have the option of not buying unnumbered irregular series. There is no doubt that some publishers

¹ American National Standards Committee Z39. A Compilation of Terms and Definitions Appearing in Z39 Standards. (Washington, D.C., 1977):47.

use collective titles to take advantage of libraries, realizing that an open entry commits a library. Decisions not to purchase should be based on careful study, have the support of library advisory groups, and be stated as written policy or in the exclusions section of the collection development policy.

2. Libraries that do decide to purchase this type of publication should flag acquisition records for special attention. These titles require aggressive bibliographic follow up on a regular basis, no less than annually and more frequently if possible.
3. Bibliographic control of this material is erratic, so searching should routinely include as many of the following as possible: Books in Series in the United States, the National Library of Medicine Current Catalog, New Serial Titles, and publisher catalogs.

Purchasing Problems

1.0 VERIFICATION.

- 1.1 Verification does not guarantee AVAILABILITY. It is possible to verify many titles that are out-of-print and not available.
- 1.2 AVAILABILITY of monographs will be affected by the ruling in the case of Thor Power Tool Company vs. the Commissioner of Internal Revenue, 1979.
- 1.3 When a title CANNOT BE VERIFIED, the decision on whether to order or not to order should depend on the adequacy of the library's bibliographic tools, the amount and accuracy of bibliographic information available, the source of the purchase request, and the source and date of the publication.
- 1.4 REPEATED VERIFICATION is justified in some cases, but not in others. A modular approach in which two departments verify the same titles is justified if it speeds work. Repeated verification within the same department often indicates conflict over one staff member's bibliographic accuracy.

2.0 PREORDER SEARCHING.

- 2.1 The simplicity or complexity of a preorder search will depend in part on whether the library acquires material through a CENTRALIZED or a DECENTRALIZED system.

3.0 SUPPLIER.

- 3.1 It is possible to go through a very thorough search and evaluation process and still get POOR SERVICE. If you get poor service, tell the distributor about it, clearly and simply.
- 3.2 If communication does not resolve the problem, the library may decide to CLOSE AN ACCOUNT. The easiest way to close an account is to simply withhold orders on a gradual basis. The worst way to close an account is to try to cancel orders when a large number of titles remain on order.
- 3.3 When a supplier MERGES with another firm, the library has the option of continuing with the resulting company or closing its account.
- 3.4 Supplier BANKRUPTCY can leave a client in a potentially difficult position. Clients of bankrupt firms must often deal with receivers and collection agencies.

- 3.5 FRAUD is a deliberate attempt to obtain money or goods by deception and library work is not without deceptive publishers and suppliers. The best defense against fraud is to deal only with reputable and well-established firms. Once you have paid a fraudulent publisher or supplier, there is very little chance of recovering your money.
- 3.6 Libraries can be SUED for failure to pay promptly. Some LAWSUITS result from supplier errors as well.
- 4.0 PURCHASE ORDER FORMS.
- 4.1 All forms should have a PROFESSIONAL APPEARANCE. Before you try to design and produce your own, consider commercially available forms.
- 5.0 ACQUISITION/SELECTION RECORDS.
- 5.1 All files, particularly desiderata files should be PURGED occasionally.
- 5.2 Since duplication of titles by selection aids is high, most librarians eventually choose a SUBSET for regular use and eliminate others.
- 6.0 RECEIVING MATERIALS.
- 6.1 While librarians can do little to prevent DAMAGE of materials in transit to them, there is much they can do to protect materials that they return. The best defense against damage is good packaging. Resist the temptation to reuse boxes to the point of exhaustion.
- 6.2 While damage is a significant problem, LOSS is a more serious obstacle to orderly collection development. The best method of detecting book loss is to request that all invoices be mailed separately rather than in the package. Loss is also related to package size: small packages are more likely to be lost than large ones. Consolidated shipments sometimes solve this problem.
- 7.0 PAYMENT.
- 7.1 When buying abroad, the easiest way of dealing with CURRENCY EXCHANGE is to ask the supplier to include the amount in both domestic currency and the equivalent dollar amounts. It is important to spot check small invoices and to check all large invoices for proper calculation of the rate of exchange.

- 7.2 PROFORMA INVOICES are those that must be paid before the material will be supplied. Institutions that sometimes balk at paying proforma invoices can sometimes be persuaded to accept them by pointing out that they are like subscriptions.
- 7.3 PREPAID ORDERS save the cost of invoicing, which often exceeds the price of a \$4.00 or \$5.00 publication. If an institutional purchasing department refuses to make prepayments, negotiate. If the purchasing agent cannot be persuaded, the library may have to resort to extra-legal means (petty cash, personal purchase) of obtaining them.
- 8.0 CLAIMS.
- 8.1 The CLAIMS procedure described previously is very effective.
- 9.0 COST.
- 9.1 COST is a very important factor in dealing with returns and adjustments. Regardless of who made the mistake, there are times when returns or adjustments are just not worth it. If the cost of returning an item is more than the cost of the item, you may wish to consider adding it to the collection if it is within the scope of the collection development policy.
- 10.0 PERFORMANCE EVALUATION.
- 10.1 STATISTICS are the key to library and supplier performance evaluation. See section eight for a general discussion.

Exchange

While exchange is an effective method of obtaining serial publications, it has limited value as a method of acquiring monographs. The MLA Exchange excludes monographs at present, but there are two other exchange alternatives, the Universal Serials & Book Exchange and direct institutional exchange.

UNIVERSAL SERIALS & BOOK EXCHANGE:

The Universal Serials & Book Exchange (USB) accepts on-demand monograph orders from members and also produces monthly subject lists of available books. USB, a nonprofit clearinghouse, began operating in 1948, and is an important source of books, documents, missing issues, and long runs. It is sometimes overlooked by medical librarians who are understandably more familiar with the MLA Exchange. USB maintains a stock of over 100,000 in-print and out-of-print monographs and 4,000,000 issues of 40,000 serial titles. Approximately 25 percent of this material is medical. A summary description of USB and a sample page from a monthly list follow the text of this section.

DIRECT INSTITUTIONAL EXCHANGE:

While some medical libraries do conduct exchange on an institution-by-institution basis, most rely on centralized exchange services such as the MLA Exchange and USB because they reduce the clerical work needed to participate in an exchange program. In general, only the largest libraries maintain direct exchange programs. Libraries studied by Kovacic (1978) averaged 200 exchange partners each, with one library reporting 4,000 individual partners! Even though these lib-

raries maintain separate gift and exchange departments, have special staff, and rely on form letters, the management of correspondence and records is still a formidable task. However, even the smallest library must sometimes maintain individual exchanges. Whether an originating institution prefers to distribute its own publications, is unable to find a reliable publisher or agent, or limits distribution for political or trade reasons, some publications simply cannot be obtained any other way.

There are several ways of locating suitable exchange partners. The most effective exchange agreements are those that support specific educational and research programs. Thus faculty and staff should be instrumental in identifying institutions and "invisible colleges" that produce significant materials. The Handbook on the International Exchange of Publications, 3d edition (1964), though dated, contains an extensive list of exchange institutions by country and subject that is the most comprehensive available. On a more personal basis, contacts can sometimes be made through MLA's International Cooperation Committee, and MLA's Ad Hoc Committee for the International Exchange and Redistribution of Library Materials is attempting to establish a library-to-library matching program for exchange purposes. Exchange partners can also be located through national exchange centers.

The United States' national exchange center, the Smithsonian Institution's International Exchange Service, acts primarily as an information clearinghouse and transportation agency for institutions which have negotiated individual agreements. J.A. Collins (1972), former

director, described its operation in an article titled "The International Exchange Service." Current details of the Service's operation can be obtained from:

Mr. John Estes, Chief
International Exchange Service
1111 North Capitol Street, N.E.
Washington, D.C. 20002
Telephone: (202) 381-5311

WHAT TO OFFER ON EXCHANGE:

Many libraries tend to look on exchange as a convenient method for disposing of monographs rather than obtaining them and use exchange to avoid decisions to destroy books. To stem the tide of obsolete and useless materials, USBE, for example, limits member shipments to three cartons per week without advance notice and requires lists prior to large shipments. The International Exchange Service accepts only materials destined for specific institutions and does not accept material on consignment.

Whether dealing with an individual partner or a centralized exchange, libraries should be selective and discriminating about what they offer. Reference materials, bibliographically or historically significant monographs, recent scientific and technical monographs, and university press publications will be most needed by other libraries; previous editions of textbooks and vanity publications will not. The following section on "Gifts" gives some alternatives for disposing of withdrawn and surplus materials that do not fit the above description.

EXCHANGE POLICIES:

If exchange is used as a method of acquisition, it should be men-

tioned in the library's collection development policy. The policy statement need not be elaborate, but should be specific about the objectives of exchange (i.e., to support specific educational and research programs, to supply items that cannot be purchased, to supply missing issues, to promote interlibrary cooperation and development); types of exchange used (institution-by-institution, centralized); and the priority of exchange within the total context of library operations.

UNIVERSAL SERIALS & BOOK EXCHANGE

SPONSORING ORGANIZATION	Universal Serials & Book Exchange, Inc. 3335 V Street, N.E. Washington, D.C. 20018 U.S.A.
ESTABLISHED	1948
SCOPE	International
STRUCTURE	CENTRALIZED. All lists and materials are forwarded to and distributed from Washington, D.C.
ELIGIBLE USERS	Limited to USBE members
MEMBERSHIP FEE	\$50.00
MATERIALS AVAILABLE	Books, documents, serials, and periodicals on demand and from monthly lists
FULFILLMENT	On demand requests searched on receipt and at repeated intervals, according to member specifications. Monthly list selections filled on a rotating priority basis.
COST PER ITEM	Libraries in the United States, Canada, Mexico: Books & documents \$9.00 per volume Periodicals 2.75 per issue Annual serials 6.00 per volume Libraries outside North America: Books & documents \$12.00 per volume Periodicals 4.75 per issue Annual serials 9.00 per volume
POSTAGE/SHIPPING	Paid by receiving library

Sample USBE Monthly Book List

- ___16607M Geddes, L. A. and Baker, L.E. Principles of applied biomedical instrumentation. Wiley (c1963) xiii, 497p. illus.
- ___16652M Geldard, Frank A. The human senses. 2d ed. Wiley (c1972) xi, 584p. illus.
- ___16603M Gjessing, Rolv R. Contribution to the somatology of periodic catatonia, in collaboration with S. Bugge (and others) Edited in English by L.R. Gjessing and F. A. Janner. Translated from the German) Oxford, Pergamon Press (1976) xxiv, 421p. illus. (part fold.)
- ___16697M Haagensen, C.D. Diseases of the breast. 2d ed. Saunders (c1971) xvi, 829p. illus. (part col.)
- ___16669M Hannington, Edda. Migraine. (Sussex, England) Priory Press (1976) 160p. diagrs., tables.
- ___16610M Harrington, David O. The visual fields; a textbook and atlas of clinical perimetry. 2d ed. Mosby, 1964. 386p. illus. (part col.)
- ___16566M Harrison, Saul I. and McDermott, John F., eds. Childhood psychopathology; an anthology of basic readings. International Universities Press (1974) xi, 903p. diagrs., tables.
- ___16556M H  lmer, Judith A. The autobiography of pain. New Voices Pub. (c1976) x, 146p.
- ___16667M Henry, Louis. On the measurement of human fertility; selected writings... Translated (from the French) and edited by Mindel C. Sheps (and) Evelyne Lapierre-Adamcyk. Amsterdam, Elsevier Pub., 1972. xix, 228p. diagrs., tables.
- ___16694M Hunter, George W. (and others) A manual of tropical medicine. 4th ed. Saunders Pub. (1967) xxxi, 931p. illus. (part col.)
- ___16695M
- ___M16641M Hypertension; proceedings of the Council for High Blood Pressure Research... 1964. Editorial boards: Simon Rodbard (and others) American Heart Association, 1965. Vol. XIII. illus., paperbd.
- ___16609M Index-handbook of ototoxic agents, 1966-1971 (by) E. Louisa Worthington (and others) Johns Hopkins Univ. Press (c1973) xvi, 673p.
- ___16629M Ingalls, A. Joy (and) Salerno, M. Constance. Maternal and child health nursing. 2d ed. Mosby, 1971. xii, 673p. illus.
- ___16666M International Conference on Intrauterine Contraception, 3d, Cairo, Egypt, 1974. Analysis of intrauterine contraception; proceedings... Editors: Fouad Hefnawi and Sheldon J. Segal. Amsterdam, North-Holland Pub., 1975. xi, 490p. illus.
- ___16639M International Conference on Product Development and manufacturing Technology, 2d, University of Strathclyde, 1971. Proceedings. Edited by D. S. Ross. London, MacDonald Pub. (1972) 384p. illus.
- ___16651M International Conference on Theoretical Physics and Biology, 1st, Versailles, France, 1967. Theoretical physics and biology; proceedings... Edited by M. Marios. (Text in English and French) Amsterdam, North-Holland Pub., 1969. viii, 443p. diagrs., tables. (binding loose)

Gifts

Gifts of books and journals are a traditional means of supplementing a library's materials budget and collection. While gift journals may initially supply a large part of a developing library's back runs and provide replacement of lost or worn materials for an established library, gift books are generally marginal in value. No library, however, can rely on gifts to supply essential materials; purchasing is always the method of choice for acquisition of essential books and journals.

ADVANTAGES OF GIFTS:

The major advantage of gifts is the opportunity of acquiring, at little or no cost other than receiving and processing, books and expensive back runs of journals.

DISADVANTAGES OF GIFTS:

The disadvantages of gifts include:

1. Condition: Many books and journals offered to libraries are in poor physical condition, with marked contents and deteriorating bindings which require expensive restoration and conservation. Library operating funds should be channeled into new acquisitions instead.
2. Obsolescence: Most gift books offered to libraries are out-of-date. Obsolete materials should not be accepted or collected with the rationalization of building a "rare" or "historical" book collection. A historical collection is carefully planned; it demands time, money, bibliographic skill, and an aggressive acquisitions policy. Merely accumulating random volumes does not create such a collection.
3. Stipulations: Donors frequently attempt to attach conditions or limitations to the use of their gifts. Among the more common, all of which should be unacceptable to libraries, are the following:

- 3.1 Permanent addition to the collection: the donor may request that the library add the gift volumes to its collection permanently and never remove them. The library must reserve the right, at any time, to be the sole judge of the content of its collection.
- 3.2 Restrictions on use: the donor may wish to exclude certain categories of users from access to the material. Materials added to the library collection should be available on an equal basis to all users without exception and the same conditions of use should apply to all users.
- 3.3 Special shelving or housing: the donor may wish to have all the volumes kept together in one location as a discrete collection. Materials that are added to the collection should be classed in the classification system used by the library and be intershelved among the collection, unless the gift is outstanding or extremely rare. Separate collections stagnate quickly and become collection management problems.
- 3.4 Physical designation: the donor may wish to have the volumes prominently displayed or physically designated by sign plates, shelf markers, or other devices. The library should reserve the right to decide what designations are used and how they are applied.
4. Unpredictability: Every volume which is added to the collection should be a planned, deliberate addition. Gifts arrive randomly, in irregular order, and are often incomplete, making it difficult to meet the criterion of deliberate addition. Buying is quicker, more efficient, and less expensive.
5. Library priorities: The major disadvantage of gifts can be summarized in terms of time and money. Processing gifts diverts valuable staff time and energy from more important priorities--patron service (reference and circulation and interlibrary loan), the acquisition of and processing of current books and journals, and staff supervision. This poor use of staff time may cost the library money in the long run.

Gift acquisition is seldom a matter of choice for the library.

In most cases, the contact is initiated by the potential donor. The librarian must assume the active role, and direct the transaction, according to library priorities. If not, donor needs and priorities will prevail over those of the library. Although most donors sincerely wish to "help" the library, they are unaware of and may not understand library

plans and priorities. Their motives are complex and the library must assume some measure of self-interest on the part of the donor. The librarian must represent the legitimate self-interest of the library and insure that the donor's need to create a "memorial" for a family member, to receive an income tax deduction, or to be relieved of a space-consuming set of volumes does not take precedence over more important priorities of the library.

ACCEPTING GIFTS:

Libraries do, of course, accept some of the gifts that are offered. The responsibility for accepting gifts should be assigned to one staff member and that person should handle all gift contacts. The decision to accept a gift should always be justified by the library's collection development policy. Never accept a gift that can't be used; never accept a gift with the intention of selling or exchanging it later.

GIFT POLICY:

Every library should develop a written policy on gifts and publicize it. Presenting potential donors with a copy of the policy at the time of the initial contact can prevent misunderstandings later. Some guidelines:

1. The library will accept gift funds at any time.
2. The library will accept gifts with prior permission only. Unsolicited gifts will be returned to the donor without acknowledgment.
3. The donor must deliver the gift to the library; the library cannot pick up gifts.
4. The library will acknowledge gifts with a letter stating

the number of items received. If the donor wishes to keep an itemized list of materials, it is his responsibility to prepare the list.

5. The library cannot appraise the value of gift materials but will recommend competent independent appraisers. The donor will need an itemized list to secure an appraisal.
6. All items donated become the exclusive property of the library; the library cannot agree to restrictions regarding use or eventual disposition of the materials.

ACKNOWLEDGING GIFTS:

Every gift should be acknowledged promptly in writing. Special gifts should be acknowledged with an individual letter; other gifts may be acknowledged with a simple form letter. In either case, the letter should be straightforward, businesslike, and never exaggerate the value or usefulness of the gift. The library can also acknowledge gifts by inserting a special book-plate in volumes added to the collection.

GIFT RECORDS:

1. The best gift record is a copy of the acknowledgment letter.
2. The record should include the date of receipt, name and address of the donor, and the number of items received.
3. Copies of other correspondence and itemized lists supplied by the donor should be attached to the acknowledgment and the complete record kept until the statute of limitations expires (7 years).
4. The preparation of bibliographies is expensive; if the donor has not supplied a copy of his itemized list, the library should not prepare one unless it is absolutely necessary for some other step in the processing routine.
5. Notes on disposition of the gift (12 replacements, 2 new titles, 20 discards) can be made on the library's copy and provide useful statistics.

If the donor intends to seek an independent appraisal, he will need an itemized bibliography. The donor should be advised to include

the author, title, edition, place, publisher, and date for each book, and the title, volume and/or issue numbers, and inclusive dates for each serial.

PROCESSING GIFTS:

Gifts should be processed immediately; never accumulate them for "later" processing.

The decision to add, store, or discard a title will be based on the library's holdings. Books should be checked against the card catalog and serials against the serial holding records. If a title is held, the condition of the library copy should be checked and it should be replaced by the gift copy if appropriate.

If a book or serial is not held, it can be considered for addition, but never add a title just because it was free. The content and quality of the item must be considered and the decision consistent with the collection as determined by the mission of the parent institution, library users, and space limitations.

When the decision to add a gift has been made it should be processed by the same procedures used for other acquisitions: books should be cataloged, serials checked-in according to the serials procedure, and union records updated.

VALUATING GIFTS:

Both the donor and the library will want to establish a valuation for gifts that are accepted. The donor will be interested in a financial valuation; the library's decision to keep or dispose of a gift may be influenced by its bibliographic and historical value. The

financial value of a gift is usually dependent on its bibliographic and historic importance and its condition.

Bibliographic Valuation:

A book or serial is bibliographically important if it is useful in documenting and verifying the existence of other publications or in answering reference questions. A bibliographic valuation can be made by checking to see if the item is cited in Blake and Roos (1967).

Historical Valuation:

A book or serial is historically valuable because of the originality and inclusiveness of its content or because it traces the development of a subject or discipline. Historically important books relate initial discoveries or contributions and occupy primary positions in the literature. Later authors refer to them or cite them, but may not repeat them. Though age can be important, publication dates are misleading and cannot be used as the sole criterion of historical value. Historically valuable materials are identified with the passage of time as succeeding generations of authors cite them consistently. Not only is it important for the medical librarian to be familiar with ancient medical history, but contemporary developments as well. Recent materials are more difficult to identify.

A historical valuation can be made by checking to see if the item is cited in Garrison and Morton (1970) or NLM's Bibliography of the History of Medicine. Medical Bibliography includes annotations which describe the significance of individual contributions to the history and development of medicine and related sciences, and is helpful in iden-

tifying classic materials. Bibliography of the History of Medicine is compiled from Index Medicus and Current Catalog and cites book and journal articles published during the current year. It is helpful in identifying works of contemporary importance.

Financial Valuation:

The financial valuation of a gift is usually the most difficult aspect of the total valuation. Because contributions to educational, charitable, religious, and scientific organizations have contributed significantly to the welfare of the nation, the federal government permits income tax deductions to donors. However, valuations are subjective, the factors involved complex, and there may be great disparity between the values of the involved parties-donor and beneficiary. Both parties may be less than objective. To prevent donors or beneficiaries from abusing the privilege, the Internal Revenue Service (IRS) has developed guidelines and limitations which are updated annually.

Many donors expect the library to provide an "appraisal" of their gift. Most are very unfamiliar with the factors of appreciation and depreciation; most have very high expectations and an unrealistic understanding of the value of their gift. The deduction-motivated donor may pressure the librarian for undue consideration, whether the gift justifies it or not. If the librarian is inexperienced in handling gifts, she may overestimate the value; if she is experienced and gives an honest valuation, the donor may believe it is too low and refuse to accept it.

Financial valuation is time-consuming and expensive, and seldom

justified. Though the law does not specifically prevent a beneficiary from making a valuation, it clearly puts the burden of proof on the donor. The librarian should not let the donor shift it to the library. Donors who insist on appraisals should be instructed to prepare their own list and set their own figure or referred to a local second-hand book dealer who will charge for the service.

When a library wishes to make a financial valuation for its own purposes or to advise a donor, it can consult Books in Print or Medical Books and Serials in Print for current imprints and Bookman's Price Index or American Book-Prices Current for out-of-print books.

Bookman's Price Index indexes the catalogs of approximately 55 rare and out-of-print book dealers, citing about 50,000 titles per year. American Book-Prices Current lists books and serials sold at auction in the United States and Europe. Both are relatively expensive and do not cite a high proportion of medical books, and since medical libraries are not an appraisal business, are hard to justify. As an alternative, the medical library can keep dealer catalogs which are randomly organized and difficult to use and justify, or rely on access to another library's copy.

If a library wishes to make an exception to the rule, no valuations, it can do so by making an indirect statement. The acknowledgment letter can be tactfully phrased to read: "Your gift saved the library \$75.00" or "It would have cost the library \$75.00 to purchase comparable materials" or "We note that the Journal of AMA is listed in Alfred Jaegers' catalog no. 36 (1976), item no. 10 for \$250.00." Always refer to such a

statement as an estimate, never as an appraisal.

Information relevant to any valuation: bibliographic, historical, or financial, should be retained for library records. The information and source can be cited on the shelf list for items which are cataloged, and on a paper slip inserted in the volume for items which are stored for later disposition.

DISPOSING OF GIFTS:

The majority of gifts will not be added. Only a small percent will be suitable for addition or have high probability of later use as a replacement. Practicality dictates that the majority of gifts be disposed of.

Disposing of unwanted or unneeded gifts can be the most difficult aspect of gift management. Unwanted gifts should be disposed of immediately; they should never be allowed to accumulate indefinitely. A rapidly accumulating set of gifts assumes de facto and emotional values it may not have. The common reaction to a large number of volumes on a shelf is, "But they must be worth something!" A library collection is distinguished from a random accumulation of volumes by its quality, cohesiveness, and the fact that each title was selected for a reason, not just accumulated. Once a set of gift volumes has been accumulated, there is often needless reluctance to dispose of them.

There are five ways a library can dispose of gifts not added to the collection:

1. Store Them: Occasionally a library receives a gift which is not needed as an immediate replacement but has a good proba-

bility of being used because of wear or theft of the original copy. These volumes can be stored.

No gift should be stored indefinitely. Set a limit on the length of time an item will be retained if not used internally, exchanged, or sold. Any item not disposed of within a year should be discarded.

Gifts should never be stored in the library, but housed in an area physically separate from the library collection, accessible to the library staff only. Always store gifts in an organized way for inventory and control purposes; if monographs are arranged alphabetically by author or main entry and serials alphabetically by title and serial order within the title, no additional record will be necessary. Books which are duplicates of library holdings can be identified by inserting a paper slip with author and class number in the volume. This speeds processing if the duplicate is ever needed as a replacement.

2. Exchange Them: Librarians should be selective about the materials they hold for exchange through local and national exchange services. Recent textbooks, quality monographs, and runs of specialty journals should be considered; superceded textbooks, scattered issues, general and throwaway journals should not.

Storage for exchange, and exchange activities themselves, should never be top priority for any library. While exchange provides a valuable service, it is costly in time and storage space and can never take precedence over service to a library's primary clientele.

3. Sell Them: If institutional policy permits, selling unneeded books to second-hand dealers and library patrons is one way of raising additional funds for current acquisitions. Dealers are interested in discrete sets of monographs (a number of books on the same topic, preferably with documented bibliographic and/or historical value) and complete runs of specialty journals. There is no market for general (Journal of the American Medical Association) or throwaway journals. All materials to be sold should be in good condition.

The librarian has the option of requesting a bid from the dealer or offering the dealer a price, and can expect to receive 1/3 to 1/2 the current market value listed in dealer catalogs.

4. Give Them Away: Some libraries prefer to give their own users the first chance at gift materials by holding give-aways in the library. The decision to give or charge for the materials will depend on library and institutional policy.

5. Discard Them: The preceding options can be costly in terms of processing, so there are times when discarding gifts can be the most practical, economic and efficient decision. While librarians are hesitant to do so, they should remember that obsolete materials can be detrimental and that there is no demand for them.

SOLICITING GIFTS:

Because the disadvantages of accepting a gift so often outweigh the advantages, and because the deluge of unsolicited materials consumes so much time, it is useful to consider whether a library should ever solicit a gift, and if so, what kind?

Soliciting gifts should never be a priority activity for the librarian. The librarian is hired for expertise in information management, not fund-raising. While librarians frequently participate or support institutional development programs, especially those aimed at physical improvements to the library, such solicitation takes time and planning and should be a secondary role for the librarian. There are times, however, when the librarian has the opportunity of soliciting a gift or expressing a preference and the choice is usually one of money or new materials.

Money is more flexible and is better oriented toward achieving library objectives. Small gifts (up to \$100.00) should be deposited in the library's operating account and used within the fiscal year. No matter what the purpose of the gift it is easier to use the funds and to follow standard order procedures. Special accounts are extremely costly in terms of overhead, and should be established only for substantial gifts.

In most cases, allowing donors to purchase new books and deliver them to the library is time-consuming and results in unnecessary delays. Allowing donors to purchase subscriptions in their own name for eventual deposit in the library is false economy and an undependable way to build a collection. The frustration of late receipts and incomplete holdings outweigh any advantage of this type of "gift."

It is important to reiterate that a library should never rely on gifts of money or material for essential materials but should include them in its operating budget.

REFUSING GIFTS:

Many libraries hesitate to refuse a gift for fear of damaging public relations. A polite refusal does not diminish good will toward the library and saves the cost of unnecessary processing. It is better to refuse with a good explanation and discourage use of the library as a convenient disposal than to perpetuate the repository image and unrealistic expectations of libraries that it creates. With a little practice it is easy to differentiate the serious collector from the "attic cleaner" and to screen out and gracefully refuse inappropriate gifts. The following suggestions may be helpful:

1. Be sympathetic, but not too sympathetic. Acknowledge the donor's thoughtfulness or good intentions, acknowledge the financial and emotional investment represented by the gift, but don't let the donor make the gift your problem-it's his.
2. Make the gift policy and the reasons behind it clear, in a way that helps the donor understand library priorities and procedures. Cite accreditation standards, space limitations, and other valid reasons, but represent the library as dynamic rather than static.
3. Offer suggestions: Suggest alternate ways of disposing of

the material-charitable organizations, serials dealers, USBE, or simply discarding. If the donor will not accept the suggestions and the material is of little value, do not encourage him to contact other hospital or medical libraries.

4. Give practical advice: Point out that most books and non-specialty journals depreciate rapidly. Encourage the donor to deduct professional expenditures immediately for full credit rather than accumulating them and expecting a lump sum deduction later.
5. Thank the donor for his consideration.
6. Practice preventive acquisitions: develop a gift policy and publicize it.

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7. AUTOMATION OF SELECTION AND ACQUISITION

Acquisition

Acquisition was one of the earliest library operations to be mechanized and subsequently automated. Functions such as fund accounting and fiscal control were particularly amenable to the capabilities of early business machines, which were largely numeric and computational, emphasized economy (brevity) of output, and lacked the storage capacity necessary to provide the alphabetic and textual versatility needed for today's order processing.

Progress from punched cards and off-line batch processing to on-line, interactive systems was rapid, stimulated in part by the unprecedented availability of funds for education and libraries in the 1960's and the simultaneous shift of selecting responsibility from faculties to library staffs in an effort to use every available collection development dollar.

Dunlap (1970) and Palmer (1974) have ably summarized the characteristics of a number of early acquisition systems. While both describe actual acquisition procedures in detail, the Palmer case studies are particularly useful because they address the limitations and inadequacies of specific systems openly and objectively.

"Automated Acquisition Systems" (1980), papers presented at the LITA Institute and published in the Journal of Library Automation, provides a good summary of the present state of the art. Available alternatives include 1) locally developed systems, 2) turnkey systems, 3) software packages, 4) distributor or supplier systems, 5) network services

and 6) combinations of the previous alternatives. Indeed, the biggest problem confronting today's librarian is the effective integration of a number of separately purchased systems, each performing single or limited operations, into an operational cohesive whole.

A decision regarding automation is usually necessitated by one of more of the following factors:

1. The need to perform a process less expensively, more quickly, or more accurately than it is presently being done.
2. The need to continue a process that can no longer be maintained manually because the volume of operations has overwhelmed the system.
3. The need to provide a new service to users that cannot be provided without a machine.¹

Once the decision to automate has been made, the first step in determining which of the available alternatives best matches the library's needs is a clear statement of automation goals and objectives. Goals are long-term end results to be achieved and address larger issues such as whether the final outcome will be: 1) partial or total automation; 2) a single integrated system or separate but compatible systems; 3) the degree to which on-line networking with other libraries is necessary or desirable; and 4) whether the library intends to invest original development efforts to achieve partial or total automation.

Objectives identify immediate and specific outcomes, such as whether the system will print order forms, control funds, and produce

¹ Allen B. Veaner, "Major decision points in library automation." College & Research Libraries 31 (September 1970): 303-304.

statistics and reports.

While it may not be possible to find a system that fulfills all the library's needs, with goals, objectives, and a list of constraints in hand, it becomes easier to compare the relative advantages and disadvantages of the available alternatives and decide which will be most effective in attaining the library's goal and objectives.

Selection

In contrast to acquisition, automation has made relatively few inroads into selection, where use of the computer is limited largely to notification and evaluation. Interest in automating the actual selection of materials results from the belief that human selection is biased and inconsistent.

Automation has had major impact as an evaluative and decision support mechanism in selection and acquisition. The collection analyses reported by Craig and Strain (1980), Kronick and Bowden (1978) and Day et al (1979), as well as others would have been difficult, if not impossible, without a computer. The ease and economy with which the computer can produce multiple copies of up-to-date reports by fund and encumbered amount makes it possible to divide and assign selecting responsibility on the basis of subject expertise or other criteria, potentially enhancing results and avoiding bottle-necks in large libraries.

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8. FINANCIAL AND STATISTICAL REPORTS

Financial Reports

Most libraries are part of an institution that provides financial reports for them. Institutional reports may contain information the library considers extraneous or exclude items the library would consider desirable, but are still a good alternative to keeping its own books. The problem in using institutional financial reports becomes one of achieving a comfortable fit by modifying or adapting the report to the library's needs.

The basic elements of fiscal control are: 1) amount or cost; 2) type of material; 3) subject; 4) location; and 5) supplier.

There are many different ways to format a financial report, but the typical array is a tabular format displaying one element (usually supplier) along the left side of the page, a second element (type or subject) across the top, and a third element (cost) in the body of the table. This system can be maintained with ease, even manually. However, as elements are added, particularly subject categories, the effort required to maintain the record increases to the point that the information derived from it may not justify the cost of preparing it. Four and five element systems are best done by automation.

Type, subject, and location are usually represented by account numbers. Thus, one way of adapting an institutional system that lacks one or more of these controls is to build them into the account number, e.g., four or more digits, the easier it is to do.

Three types of materials--monographs, serials, and audiovisuals--could be designated with three separate account numbers--9100, 9200, and 9300. A library with two separate branches that needed a separate accounting by type for each could designate a second, exclusive set of account numbers--9400, 9500, 9600--for the same materials. The final two digits of each account number could be used to identify up to 99 different subjects for each location.

Obviously, this degree of control works best for large libraries that have materials budgets greater than \$50,000 and is too detailed for libraries with materials budgets less than \$50,000 which can maintain manual bookkeeping systems if necessary.

Another common problem of institutional financial reporting is timeliness. Most institutions produce financial reports on a monthly basis and cumulate them annually, which is an adequate schedule for most purposes. However, the time it takes to produce and distribute reports varies from institution to institution and while a two week delay between production and receipt is neither unusual or unreasonable, it does create problems. The lag time in the library's records actually becomes six weeks; four weeks for the monthly reporting period and two weeks for production and distribution. Medium and large libraries routinely payout \$20,000 in a six week period, an amount which--gone but invisible on the books--can lead to overexpenditures at the close of the fiscal year. Because it is virtually impossible to change institutional reporting cycles, many libraries must keep a duplicate set of records to maintain financial control.

When dual accounting records are necessary, the library should use an absolute minimum of information and avoid duplicating extensive portions of the institutional record. What is essential, on any day of the fiscal year, is to know what amount of the total materials budget has been spent and what amount remains. A running total by supplier, invoice number, and invoice amount provides sufficient control. More detailed expense records can wait six weeks.

Financial reports should be readily accessible to department heads and selectors. Allocation of funds by subject and shared selecting are impossible without access to financial reports.

Statistical Reports

Statistical reports are the key to successful budgeting and performance evaluation, yet despite their importance, compiling statistics tends to be one of the most difficult and least liked tasks in library operations. As a profession, we lack meaningful measures. Never having been able to agree whether titles or volumes are more important, we count both. In addition, some statistics are chosen for "defensive" rather than managerial value.

Operationally, compiling statistics manually is time consuming and tedious. Preparation of acquisition statistics, for example, usually involves counting several items on many individual order forms; e.g., title volumes, number of copies, cost subject category and/or fund. Each form must be examined simultaneously for all relevant items or the file searched successively for individual items. The same item, derived from different records, may conflict. Dollar

totals compiled using order/receipt forms may differ from dollar totals derived from financial reports, so it is not uncommon to use several different sources to compile annual statistical reports.

And when the counting is done and final reports compiled, the statistics of two departments that appear to be handling the same material may differ greatly. Acquisitions, for example, may report purchasing 2,226 monographs while Cataloging may report processing 3,618 monographs. Automated statistical procedures have relieved some of the frustration but have not solved the problem entirely.

Regardless of a library's size, statistics become more manageable when the work is divided. One approach is to produce annual and special reports at different times of the year, each containing limited, but precise amounts of information, duplicating as little as possible. The annual report may be produced at the end of the fiscal year to summarize total acquisition activity, including expenditures. An annual report should include:

1. The number of items acquired per category of material (i.e., monographs, periodicals, serials, documents).
2. Total cost per category.
3. The average cost of item per category.
4. The percent of total acquisitions per category (i.e., monographs 25%).

The average cost per item makes it possible to adjust and project subsequent budgets accurately. This is especially important for libraries that seem to acquire consistently less material than they project. For example, a neurology library that uses the general price

index for medical books may fall short of the number of titles it expects to acquire because the average cost of specialty monographs is higher. Though such a library may wish to use published price indexes to establish a minimum cost per title, it must adjust its average cost per title upward to allow for acquisition of a specific number of titles.

Libraries that consistently acquire more than they project seldom complain! But this situation should be analyzed as well. It may be that selectors are selecting at an inappropriate level. While undergraduate medical study guides and lecture notes may provide more volumes at lower cost, they will be of little use in a clinical medical library.

When subject analyses are required for an annual report, these are best done by broad categorization (i.e., preclinical sciences, clinical medicine, dentistry, nursing). Detailed subject analyses by classification number should be prepared as special reports, by the catalog department, or as a joint effort of several departments. Detailed classification information is seldom available in Acquisitions for all items and requires additional work to compile. Likewise, supplier analyses by fulfillment time and claims, and the analysis of problem orders should be compiled as special reports. Consider the possibility of sampling to produce special reports. If the file is large and properly constructed, samples produce results comparable to analysis of the entire file.

The problem of conflicting interdepartmental reports cannot be resolved by a single department but requires cooperative effort on the part of the staff in conjunction with the library administration. Whether manual or automated, STATISTICAL REPORTS SHOULD BE AS SIMPLE AS POSSIBLE.

9. INVENTORY AND WEEDING

Inventory

A periodic inventory of monographs is essential for keeping the book collection orderly and readily accessible to users. A great deal of user frustration and disappointment can be avoided by this procedure and it can correct problems created by misshelved or mismarked books or incorrect records in both the public catalog and shelf list. Inventories also help identify areas of high book loss and volumes in need of repair or rebinding. Since an inventory involves no evaluative decision-making, but rather the verification of the shelf list with what is actually on the library's shelves, it can be performed by clerical or student staff with a minimum of supervision.

The inventory of large collections can be a costly and questionable undertaking, but it has been suggested that complete inventories of collections under 100,000 volumes are feasible and justifiable (Martin, 1971). For larger libraries it may be more reasonable to perform partial collection inventories or random sample studies to determine if loss and error rates are significant enough to warrant the time and expense necessary to do a complete inventory.

Various methods have been used to conduct inventories. The following steps are basic to all and may be modified to suit the individual needs of libraries. Before beginning, staff should be thoroughly instructed on the inventory procedures. If staff is available, shelf reading prior to inventory will expedite the process by catch-

ing some of the more obvious misshelving which might otherwise hinder the inventory staff.

The following is a sample inventory procedure:

1. A team of two, armed with a shelf list drawer, inventory slips and a book truck, work together, one reading the call numbers from the shelf list cards and the other verifying the call numbers marked on the books.
2. If the shelf list card and monograph agree and the book is not in need of repair or rebinding, continue in the same manner. When the problems listed below occur, follow the appropriate instruction:
 - a. Shelf list card but no monograph: turn the shelf list card up in the drawer (alternative methods are removing the cards or clipping the shelf list cards)
 - b. Monograph but no shelf list card: place an inventory slip in the volume marked "no shelf list card" and place on book truck
 - c. Error in call number: place an inventory slip in volume marked "error" noting the call number from the shelf list card on the slip and place on book truck
 - d. Monograph in need of repair/rebinding: place an inventory slip in the volume marked "repair" or "rebind" and place on book truck
3. Send monographs on book truck to appropriate department for repairs/rebinding and corrections.
4. At the end of the day, shelf list cards for missing monographs are checked against the circulation files. If circulation records are found for missing titles, replace shelf list cards.
5. Shelf list cards for titles not found should be pulled for further searching one to three months after initial inventory.
6. Monographs not located after approximately three months should be assumed lost, replacement decisions made, and card sets for titles that are not replaced should be pulled from the public catalog.

As the inventory is being conducted, statistics should be recorded on the number of call number errors, repairs and missing shelf list cards. This information may help identify recurring problems in processing monographs. Lost book information should be compiled by classification field and age of book. This information will reveal the most vulnerable parts of the collection as well as loss, mutilation and theft patterns. Based on this information inventory needs can be assessed and inventory activities planned for high loss areas can be completed more frequently. In one study (Bowden, 1977) it was found that more than 10% of the holdings from three areas (nursing, anatomy, and psychiatry) were missing after a complete inventory. Overall, 1,957 items (5.65%) were missing from a total monographic collection of almost 35,000.

Weeding

Essentially, weeding is the reverse of selection. It is the process of identifying and removing items from the collection which are considered to be of little value to library users. Primary reasons for weeding are lack of space and the availability of new editions and new material. Outdated or seldom-used titles may be stored or withdrawn completely. Weeding can save space, improve access and, ultimately, save money.

The concept of weeding has been called a variety of names; e.g., pruning, negative selection, deselection, collection control, and collection review. It is an important aspect of collection development and one that has been largely ignored by most librarians. As mention-

ed in section three, weeding and disposing of materials should be detailed in the written collection development policy. Weeding should be a continuous, planned part of a collection development program, not a last resort to alleviate space problems.

Without a concerted effort at weeding, a collection can become unmanageable and obsolete. The quality, not the size, of a collection determines its value. If growth of the collection continues at a rapid rate and weeding is not seriously considered, the only two alternatives are the expansion of physical facilities and dividing the collection for either remote or compact storage. Both alternatives require space, whereas weeding can ultimately make available needed space.

Again, it needs to be emphasized that a weeding program should be part of an overall collection development program. It can provide feedback on collection use which contributes to refinement of collection development policies which in turn provide the basis for formulating weeding guidelines.

The kinds of monographic materials that tend to be withdrawn as a result of weeding fall into two categories: 1) titles that have outlived their usefulness; and 2) titles which have received very low use and that probably should not have been originally added to the collection. Ongoing refinement of the collection development policy will reduce the number in the latter category. The individual responsible for weeding should be particularly aware of the circulation patterns of various subject areas. When it is discovered that sections of the collection are not receiving significant use, the collection develop-

ment policy for that area should be re-examined and refined.

Before a weeding program is adopted institutional needs and responsibilities should be considered. If user information needs revolve around materials of current interest and utility, then weeding and withdrawal are appropriate. More conservative weeding may be indicated if historical information is needed or the library is committed to resource sharing or support programs. In such cases, less frequently used materials are often candidates for storage, freeing space in the primary stack area.

The rapid obsolescence of information in the biomedical sciences requires conscientious monitoring and evaluation. Older editions and outdated materials may contain incorrect information making their retention not only unwise but potentially harmful if that information is used as a basis for decision-making. In addition, the quality of the collection may appear weak to users who encounter outdated and inaccurate material on the shelves.

In any case, weeding is sometimes strongly resisted by individuals who feel the collection may be weakened by withdrawal. The term weeding is often viewed as a red flag by these individuals, and a more positive euphemism such as "retention policy" or "negative selection" may produce less opposition. Educating users and administrators to the value of weeding in maintaining a current relevant collection and making efficient use of space is important.

The practice of weeding health science collections is upheld in the following statement by the Joint Commission on Accreditation of

Hospitals in its current library standards:

"Written policies and procedures for professional library services shall be current, and shall relate to the length of time that library materials shall be retained, and the disposition or storage of outdated or unusable books and periodicals."

Many factors must be considered in weeding an item. Primary considerations include the nature of the subject discipline and its publications, the present and future needs and use patterns of patrons, and the characteristics of the book, including language, age, content, and physical condition. The most applicable criteria to biomedical libraries appear to be age, content (obsolete or inaccurate), and use.

Since currency is often so critical in scientific literature, increasing age generally reflects poorly on current relevancy and usefulness. This is particularly evident with outdated texts and other regularly revised publications. Of course some monographic titles circulate widely regardless of age because of their uniqueness, excellence, or distinction of being the classic or seminal works in the field.

Of all the criteria suggested for weeding collections, use patterns appear to be the most consistently valid. Findings of a number of use studies indicate that previous circulation is the best predictor of future use. Essentially this body of literature states that publications with a history of poor or no circulation will have a similar future, making them marginal to the collection. This conclusion

¹ Joint Commission on Accreditation of Hospitals. Accreditation Manual for Hospitals, 1979 ed. (Chicago, 1978): 140-141.

is compatible with common sense for if a title, particularly a biomedical one, is not heavily used while current it is doubtful that it will be in later years.

Another finding of use studies having implications for weeding is the conclusion that recorded use appears to be a good predictor of nonrecorded use. While in most cases a reliable assumption, such a conclusion probably bears further study, particularly in biomedical libraries where large parts of the collection are restricted to in-house use or the tendency to photocopy parts of works rather than borrow an entire publication is more common.

Employing use criteria as a guide to weeding requires some reliable measure of collection use. Accurate and complete circulation records from book cards or date due slips are the most frequently used indicators. Libraries not currently maintaining circulation records should consider developing this information for future weeding activities. An alternative to circulation records may be a system of marking or tagging circulating or reshelved publications, such as spine markings, to distinguish them from the non-circulating titles in the collection.

As a general guide, monographs should be pulled for review when they have been in the collection anywhere from 5 to 10 years and have no history of circulation or in-house utility during that period. This time range is offered as a general guide as use patterns may vary considerably from library to library and from discipline to discipline.

Many studies have been designed to determine optimal weeding criteria for individual library needs based on the analysis of use patterns. These studies are described widely in the literature and include suggestions for their practical application in the library setting (Slote, 1975).

Monographs under consideration for removal from the collection should be reviewed by subject experts if there is doubt about the value or potential need for these titles. The subject experts should play an advisory role, but the librarian should have authority for the final decision. The problem of limited faculty vision is noted in the following observation:

"Weeding decisions made by faculty experts are usually even less reliable than those made by librarians. Subject expertise counts for very little when the central problem is to predict mass behavior of a very large population of users." ²

While it is occasionally necessary to retain unneeded publications for political reasons the librarian should not be habitually restricted by the whims or biases of users who fail to understand the purpose of the library collection.

The following categories of monographs can usually be routinely selected for weeding: 1) multiple copies of a title; 2) noncurrent textbooks; and 3) old editions replaced by current revisions. Guides

² Trueswell, Richard W. "Growing libraries: who needs them?" In Daniel Gore, Farewell to Alexandria; Solutions to Space, Growth and Performance Problems of Libraries. (Westport, CT, Greenwood Press, 1976): 80.

to determining the financial and/or historical value of monographs considered candidates for weeding are discussed in section six under "Gifts."

Resistance to weeding includes the following reasons: 1) lack of time; 2) putting it off; 3) fear of making a mistake; and 4) reluctance to discard materials. However, once the decision to weed a title has been made, the choices for disposing the withdrawn volumes include: 1) sale; 2) exchange (see section six); and 3) discard.

Weeding can insure a dynamic collection and return additional space for housing new acquisitions. On the other hand, it involves expenses in time, personnel and materials through the deaccessioning, storage, microduplication and discarding processes. The consequences of mistakes may range from unhappy patrons to high replacement expenses for some items weeded.

The weeding policy should be part of the written collection development policy. If this is not done, the chance for mistakes in weeding is greatly increased. Once established, a weeding program should be maintained on a regular and continuing basis to be effective.

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10. COLLECTION EVALUATION

There are three basic approaches to collection evaluation: 1) quantitative methods; 2) qualitative methods; and 3) use studies. Lancaster (1977) and Bonn (1974) have thoroughly reviewed all three methods.

Quantitative Methods

A simple count of the total collection and the materials in various categories (type and/or subject) is the most basic quantitative method. It is also the most limited. Collection size indicates little in itself but does become more meaningful when compared to numeric standards or quantitative data describing similar collections. Minimum standards are difficult to establish but do exist for several types of collections including public, school, college, junior college, and special libraries. The most widely known quantitative standard is the Clapp-Jordan (1965) formula, which defines minimum collection for an academic library in terms of a constant, representing the minimum viable collection size (50,750) plus the weighted sum of several variables including, but not limited to, the number of faculty, students, masters, and doctoral programs.

There is at least one informal numeric standard for health sciences libraries: Rees and Crawford did not consider any library with a collection of less than 500 monographs or 25 serial titles for inclusion in the Directory of Health Sciences Libraries, 1979.

Some of the numeric standards referred to above are far from arbitrary but derived from existing data on similar collections. They

are therefore comparatively based. Comparative quantitative data are available for academic medical and hospital libraries.

Annual Statistics of Medical School Libraries in the United States and Canada, 1979-80, includes ranked lists by number of volumes, gross additions, net additions, number of subscriptions, number of serials, and acquisition expenditures. While separate figures for monograph collections are not included, a library's relative position in such a ranked list may be a more important indicator of collection adequacy than similarity to any arbitrary standard.

The Directory of Health Sciences Libraries, 1979, contains collection data for both hospital and academic medical libraries. The 1973 Directory included statistics in tabular form; corresponding statistics, derived from the 1979 survey, will be published as a separate monograph. Prior to publication of the monograph, the 1979 Directory can be used for comparative purposes by identifying similar libraries and accessing the data institution by institution.

Qualitative Methods

Qualitative methods of evaluation include expert appraisal and bibliographic checking. Expert appraisals are possible in both academic and hospital libraries, drawing on faculty and staff respectively. Evaluation can be conducted by questionnaire, interview, having the appraiser work from the shelf list or go directly to the shelf. However, results of the appraisal will only be as good as the appraiser.

It may be possible to find appraisers in some subject areas who

have used the library being evaluated and other libraries, as well, and who are informed about the degree to which the collection is meeting the needs of their students and colleagues, but it will be difficult to find them in many areas. An expert appraisal, no matter how good, represents a basically limited viewpoint. Citation studies, which are indicative of a wider consensus, have not yet been widely applied to the evaluation of monographic collections.

A second method of collection evaluation is to check the library's holdings against authoritative bibliographies and core lists, as described in section four.

Use Studies

Use studies can be based on circulation records, shelving studies, or a combination of techniques. Data derived from use studies is applicable not only to collection evaluation but other managerial decisions as well, particularly storage and accessibility. Collection sampling studies the relative use of large portions of a collection over an extended period of time, and requires some record of how often a book has been borrowed. Studies summarized by Lancaster (1977) indicate that past use of a title is the best predictor of future use. When past records are not available, the use of scientific and technical monographs can be predicted by age and language.

Circulation studies provide data on relative use of a collection over limited periods of time. The results of at least one in-house study, conducted by questionnaire rather than shelving studies, show that

circulation and in-house use are highly correlated. Titles that circulate frequently are also used more frequently in-house.

One extensive use study conducted at the University of Pittsburgh (Galvin, 1977) confirms the validity of previous use as a predictor of future use. A major conclusion of this study was that when a book did not circulate within the first two years of ownership, the chances of its ever being borrowed were reduced to less than one in five. In addition, when a book did not circulate within the first six years of ownership, the prospects of its ever being borrowed were reduced to less than one chance in 50.

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APPENDIX

Sample Collection Development Policy

The following policy was developed and written by Carol A. Eisenbaum as part of the requirements for completion of the Medical Librarianship course in the School of Library and Information Science at Drexel University where one of us (JEB) is an adjunct faculty member.

COLLECTION DEVELOPMENT POLICY

Schwartz Memorial Library
John F. Kennedy Memorial Hospital
New Jersey School of Osteopathic Medicine
Waterford, New Jersey 08089

The collection development policy of Schwartz Memorial Library is a written document providing guidelines for building and maintaining a collection of resources adequate to the current and long-term biomedical information needs of all professions and occupations represented among its users. Selections will reflect the clinical, educational, and research needs of all employees and medical staff of John F. Kennedy Memorial Hospital and the faculty and students of the New Jersey School of Osteopathic Medicine.

Users of Schwartz Memorial Library include all John F. Kennedy Memorial Hospital employees, housestaff, attending physicians, and administration and all New Jersey School of Osteopathic Medicine students, faculty, and employees.

Scope and Coverage of Collection

A core collection of textbooks, reference materials, journals, and audiovisual materials based on standard published core lists and relevant to all professions and occupations employed in the Hospital and all clinical rotations of New Jersey School of Osteopathic Medicine will be maintained.

The levels of coverage of subject material shall be:

1. Minimal Level - For a subject area collected on the minimal level, a general reference tool and one or two basic texts will be obtained. Minimal collecting will be appropriate in areas not represented by Hospital or School services or occupations but of possible general interest.
2. Basic Level - For a subject area collected on the basic level, the Library will obtain the latest or best editions of several texts, general reference works and one or more basic journals. Basic collecting is appropriate in areas where the Hospital or School provides services but does not have clinical rotations, residency programs or fellowships.
3. Study Level - For a subject area collected on the study level,

the Library will obtain the current or best editions of those books, journals, reports or audiovisual materials to permit some independent research by employees, physicians, faculty and students, and to provide a broad outline of current knowledge in the subject. Study level collecting will be appropriate in areas where the Hospital or School has residency programs or fellowships or specialized services.

Subject Analysis

Subject areas will be collected according to these levels of coverage:

STUDY LEVEL

<u>NLM CLASS</u>	<u>SUBJECT</u>
QY	Clinical Pathology
QZ	Pathology
W	Medical Profession
WB	Practice of Medicine
WC	Infectious Diseases
WD 100	Deficiency Diseases
WD 200	Metabolic Diseases
WD 300	Diseases of Allergy
WE	Musculoskeletal System
WF	Respiratory System
WG	Cardiovascular System
WH	Hemic & Lymphatic System
WI	Gastrointestinal System
WJ	Urogenital System
WK	Endocrine System
WL	Nervous System
WM	Psychiatry
WN	Radiology
WO	Surgery
WP	Gynecology
WQ	Obstetrics
WR	Dermatology
WS	Pediatrics
WX	Hospitals
WY	Nursing

BASIC LEVEL

<u>NLM Class</u>	<u>SUBJECT</u>
QS	Human Anatomy
QT	Physiology

QU	Biochemistry
QV	Pharmacology
QW	Bacteriology, Immunology
WA	Public Health
WT	Geriatrics, Chronic Disease
WV	Otorhinolaryngology
WW	Ophthalmology

MINIMAL LEVEL

<u>NLM CLASS</u>	<u>SUBJECT</u>
BF	Psychology
H	Sociology
QX	Parasitology
WU	Dentistry
WZ	History of Medicine

Responsibility for Selection

Recommendations for purchase of materials are readily accepted from all Hospital and School personnel. Final responsibility for selection resides with the Medical Librarian with the authority given by the Library Committee. Department heads, physicians, and faculty may serve as consultants for subject review when appropriate.

Material Formats

While the majority of the collection will be in monographs, continuations, and journals, audiovisual materials will be selected to expand the learning resources available. Government documents and reports will be collected on a limited basis.

Weeding

To keep the collection current and to maintain adequate shelf space for new acquisitions, material will be weeded regularly. Two previous editions of current standard texts will be retained for circulation. All other previous editions and outdated material (pre-1960) will be discarded unless specifically requested not to. Material of possible historical value will be retained. Material for discard will be offered to Library patrons before being placed on exchange or made available to used book dealers.

Gifts

Gifts of books, journals, or audiovisual material will only be added to the collection if they are current or of historical value. A condition of acceptance of gifts is that they may be used and/or

disposed of at the discretion of the Medical Librarian. All gifts will be acknowledged by letter stating nature of and quantity of items received; estimates of value will not be made by Medical Librarian.

Multiple Copies

Multiple copies of core items or required texts will be acquired with one copy being placed on reserve. There will be no multiple journal subscriptions.

Acquisition of Material

The Medical Librarian will employ judicious methods of acquiring material from reputable dealers according to policies of Hospital and School purchasing departments. Acquisitions will be kept within the confines of the approved budget for the fiscal year.

Cooperative Relationships

Schwartz Memorial Library is a member of the Southwest New Jersey Consortium for Health Information Services and participates in that group's journal rationalization and exchange programs. The Library also utilizes the Medical Library Exchange to obtain missing issues of periodicals as well as to dispose of duplicate copies in the collection. The Library uses interlibrary loans to obtain material through the New Jersey State Library System and the Regional Medical Library network. Participation in these cooperative arrangements eliminates purchasing ephemeral or esoteric material.

Staff Publications

The Library will acquire one copy of all journal articles or monographs written or published by Hospital or School personnel.

Departmental Libraries

The Library recognizes that Hospital or School departments have need for a small collection of ready reference tools and emergency manuals available on location. These out-of-library collections are to be funded, selected, and acquired by the individual department. The Medical Librarian will provide consultation and assistance when requested. Department heads are encouraged to check with the Library before ordering material to avoid unnecessary duplication.

Policy Drafted: March 1981

Policy Reviewed:

Policy Accepted:

Signed: _____

